Utah's Division of Child and Family Services

Southwest Region Report

Qualitative Case Review Findings

Review Conducted February 7-11, 2005

A Joint Report by
The Child Welfare Policy and Practice Group
and
The Office of Services Review, Department of Human Services

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I. Introduction

The Division of Child and Family Services (the Division) completed a comprehensive plan for the delivery of services to families and children in May 1999, entitled <u>The Performance</u> <u>Milestone Plan</u> (the Plan) pursuant to an order issued by United States District Court Judge Tena Campbell. On October 18, 1999, Judge Campbell issued an order directing the Division as follows:

- > The Plan shall be implemented.
- ➤ The Child Welfare Policy and Practice Group (the Child Welfare Group) shall remain as monitor of the Division's implementation of the Plan.

The Plan provides for four monitoring processes. Those four processes are: a review of a sample of Division case records for compliance with case process requirements, a review of the achievement of action steps identified in the Plan, a review of outcome indicator trends, and, specific to the subject of this report, a review of the quality of actual case practice. The review of case practice assesses the performance of the Division's Regions in achieving practice consistent with the practice principles and practice standards expressed in the Plan, as measured by the Qualitative Case Review (QCR) process.

The Plan provides for the QCR process to be employed as one method of assessing frontline practice for purposes of demonstrating performance sufficient for exit from the David C. Settlement Agreement and court jurisdiction. Related to exit from qualitative practice provisions, the Division must achieve the following in each Region in two consecutive reviews:

- > 85% of cases attain an acceptable score on the child and family status scale.
- ➤ 85% of cases attain an acceptable score on the system performance scale, with core domains attaining at least a rating of 70%.

The Plan anticipates that reports on the Division's performance, where possible, will be issued jointly by the Child Welfare Group and the Division, consistent with the intent of the monitor and the Division to make the monitoring process organic to the agency's self-evaluation and improvement efforts.

II. Practice Principles and Standards

In developing the Plan, the Division adopted a framework of practice, embodied in a set of practice principles and standards. The training, policies, and other system improvement strategies addressed in the Plan, the outcome indicators to be tracked, the case process tasks to be reviewed, and the practice quality elements to be evaluated through the QCR process all reflect these practice principles and standards. They are listed below:

Protection	Development	Permanency
Cultural Responsiveness	Family Foundation	Partnerships
Organizational Competence	Treatment Professionals	

In addition to these principles or values, the Division has express standards of practice that serve both as expectations and as actions to be evaluated. The following introduction and list is quoted directly from the Plan.

Though they are necessary to give appropriate direction and to instill significance in the daily tasks of child welfare staff, practice principles cannot stand alone. In addition to practice principles, the organization has to provide for discrete actions that flow from the principles. The following list of discrete actions, or practice standards, have been derived from national practice standards as compiled by the CWPPG, and have been adapted to the performance expectations that have been developed by DCFS. These practice standards must be consistently performed for DCFS to meet the objectives of its mission and to put into action the above practice principles. These standards bring real-life situations to the practice principles and will be addressed in the Practice Model development and training.

- 1. Children who are neglected or abused have immediate and thorough assessments leading to decisive, quick remedies for the immediate circumstances, followed by long-range planning for permanency and well-being.
- 2. Children and families are actively involved in identifying their strengths and needs and in matching services to identified needs.
- 3. Service plans and services are based on an individualized service plan, using a family team (including the family, where possible and appropriate, and key support systems and providers), employing a comprehensive assessment of the child and family's needs, and attending to and utilizing the strengths of the child and his/her family strengths.
- 4. Individualized plans include specific steps and services to reinforce identified strengths and meet the needs of the family. Plans should specify steps to be taken by each member of the team, time frames for accomplishment of goals, and concrete actions for monitoring the progress of the child and family.
- 5. Service planning and implementation are built on a comprehensive array of services designed to permit children and families to achieve the goals of safety, permanence and well-being.
- 6. Children and families receive individualized services matched to their strengths and needs and, where required, services should be created to respond to those needs.

- 7. Critical decisions about children and families, such as service plan development and modification, removal, placement and permanency, are, whenever possible, to be made by a team including the child and his/her family, the family's informal helping systems, foster parents, and formal agency stakeholders.
- 8. Services provided to children and families respect their cultural, ethnic, and religious heritage.
- 9. Services are provided in the home and neighborhood-based settings that are most appropriate for the child and family's needs.
- 10. Services are provided in the least restrictive, most normalized settings appropriate for the child and family's needs.
- 11. Siblings are to be placed together. When this is not possible or appropriate, siblings should have frequent opportunities for visits.
- 12. Children are placed in close proximity to their family and have frequent opportunities for visits.
- 13. Children in placement are provided with the support needed to permit them to achieve their educational and vocational potential with the goal of becoming self-sufficient adults.
- 14. Children receive adequate, timely medical and mental health care that is responsive to their needs.
- 15. Services are provided by competent staff and providers who are adequately trained and who have workloads at a level that permit practice consistent with these principles.

III. The Qualitative Case Review Process

Historically, most efforts at evaluating and monitoring human services, such as child welfare, made extensive, if not exclusive, use of methods adapted from business and finance. Virtually all of the measurements were quantitative and involved auditing processes: counting activities, checking records, and determining if deadlines were met. Historically, this was the approach during the first four years of compliance monitoring in the David C. Settlement Agreement. While the case process record review does provide meaningful information about accomplishment of tasks, it is at best incomplete in providing information that permits meaningful practice improvement.

Over the past decade there has been a significant shift away from exclusive reliance on quantitative process oriented audits and toward increasing inclusion of qualitative approaches to evaluation and monitoring. A focus on quality assurance and continuous quality improvement is now integral, not only in business and in industry, but also in health care and human services.

The reason for the rapid ascent and dominance of the "quality movement" is simple: it not only can identify problems, it can help solve them. For example, a qualitative review may not only identify a deficiency in service plans, but may also point to why the deficiency exists and what can be done to improve the plans. By focusing on the critical outcomes and the essential system performance to achieve those outcomes, attention begins to shift to questions that provide richer, more useful information. This is especially helpful when developing priorities for practice improvement efforts. Some examples of the two approaches may be helpful:

AUDIT FOCUS:

"Is there a current service plan in the file?"

QUALITATIVE FOCUS:

"Is the service plan relevant to the needs and goals, and coherent in the selection and assembly of strategies, supports, services, and timelines offered?"

AUDIT FOCUS:

"Were services offered to the family?"

QUALITATIVE FOCUS:

"To what degree are the implementation of services and results of the child and family service plan routinely monitored, evaluated, and modified to create a self-correcting and effective service process?"

The QCR process is based on the Service TestingTM model developed by Human System and Outcomes, Inc., which evolved from collaborative work with the State of Alabama, designed to monitor the R. C. Consent Decree. The Service TestingTM model has been specifically adapted for use in implementing the Plan by the Division and by the court monitor, the Child Welfare Group, based on the Child Welfare Group's experience in supporting improvements in child welfare outcomes in 11 other states. Service TestingTM represents the current state of the art in evaluating and monitoring human services, such as child welfare. It is meant to be used in concert with other sources of information, such as record reviews and interviews with staff, community stakeholders, and providers.

The Utah QCR process makes use of a case review protocol adapted for use in Utah from protocols used in 11 other states. The protocol is not a traditional measurement designed with specific psychometric properties. The QCR protocol guides a series of structured interviews with key sources such as children, parents, teachers, foster parents, Mental Health providers, caseworkers, and others to support professional appraisals in two broad domains: Child and Family Status and System Performance. The appraisal of the professional reviewer examining each case is translated to a judgment of acceptability for each category of functioning and system

performance reviewed using a six-point scale ranging from "Completely Unacceptable" to "Optimally Acceptable." The judgment is quantified and combined with all other case scores to produce overall system scores.

The Utah QCR instrument assesses child and family status issues and system performance in the following discrete categories. Because some of these categories reflect the most important outcomes (Child and Family Status) and areas of system functioning (System Performance) that are most closely linked to critical outcomes, the scoring of the review involves differential weighting of categories. For example, the weight given permanence is higher than for satisfaction. Likewise, the weight given functional assessment is higher than the weight for successful transitions. These weights, applied when cases are scored, affect the overall score of each case. The weight for each category is reflected parenthetically next to each item. The weights were chosen by Utah, based upon their priorities at the time the protocol was developed.

Child and Family Status	System Performance
Child Safety (x3)	Child/Family Participation (x2)
Stability (x2)	Team/Coordination (x2)
Appropriateness of Placement (x2)	Functional Assessment (x3)
Prospects for Permanence (x3)	Long-Term View (x2)
Health/Physical Well-Being (x3)	Child and Family Planning (x3)
Emotional/Behavioral Well-Being (x3)	Plan Implementation (x2)
Learning Progress (x2), OR,	Supports/Services (x2)
Learning/Developmental Progress (x2)	Successful Transitions (x1)
Caregiver Functioning (x2)	Effective Results (x2)
Family Functioning/Resourcefulness (x1)	Tracking Adaptation (x3)
Satisfaction (x1)	Caregiver Support (x1)
Overall Status	Overall System Performance

The fundamental assumption of the Service TestingTM model is that each case is a unique and valid test of the system. This is true in the same sense that each person who needs medical attention is a unique and valid test of the health care system. It does not assume that each person needs the same medical care, or that the health care system will be equally successful with every patient. It simply means that every patient is important and that what happens to that individual patient matters. It is little consolation to that individual that the type of care they receive is *usually* successful. This point becomes most critical in child welfare when children are currently, or have recently been, at risk of serious harm. Nowhere in the child welfare system is the unique validity of individual cases clearer than the matter of child safety.

Service TestingTM, by aggregating the systematically collected information on individual cases, provides both quantitative and qualitative results that reveal in rich detail what it is like to be a consumer of services and how the system is performing for children and families. The findings of the QCR will be presented in the form of aggregated information. There are also case stories written at the conclusion of the set of interviews done for each case. They are provided to clarify the reasons for scores assigned, to offer steps to overcome obstacles or maintain progress, and as illustrations to put a "human face" on issues of concern.

Methodology

Cases reviewed were randomly selected from the universe of the case categories of out-of-home (SCF), Protective Family Preservation (PFP) services, Protective Services Supervision (PSS), and Protective Service Counseling (PSC) in the Region. These randomly selected cases were then inserted into a simple matrix designed to ensure that critical facets of the Division population are represented with reasonable accuracy. These variables stratified the sample to ensure that there was a representative mix of cases of children in out-of-home care and in their own homes. For children in out-of-home care, the sample was further stratified to assure that children in a variety of settings (family foster care, group care, and therapeutic foster care) were selected. Cases were also distributed to permit each office in the Region to be reviewed and to assure that no worker had more than one of his/her cases reviewed. An additional number of cases were selected to serve as replacement cases, which are a pool of cases used to substitute for cases that could not be reviewed because of worker or family circumstances (illness, lack of family consent, etc).

The sample thus assured that:

- ➤ Males and females were represented.
- ➤ Younger and older children were represented.
- ➤ Newer and older cases were represented.
- ➤ Larger and smaller offices were represented.

A total of 24 cases were selected for the review, and 24 cases were reviewed.

Reviewers

The Child Welfare Group qualitative reviewers included professionals with extensive experience in child welfare and child mental health. Most of the reviewers had experience in the Alabama child welfare reform, as well as other reform and practice improvement initiatives around the United States. The Child Welfare Group has employed the QCR process in 11 different states. Utah reviewers "shadow" the Child Welfare Group reviewers as a part of an organized reviewer training and certification process. These reviewers, once certified, become reviewers themselves and participate in subsequent reviews as part of the plan to develop and maintain internal capacity to sustain the review process. At this point, one half of the reviewer contingent ordinarily consists of Child Welfare Group reviewers and one half consists of certified Utah reviewers.

Stakeholder Interviewers

As a compliment to the individual case reviews, the Child Welfare Group staff and Utah staff interview key local system leaders from other child and family serving agencies and organizations in the Region about system issues, performance, assets, and barriers. These external perspectives provide a valuable source of perspective, insight, and feedback about the performance of Utah's child welfare system. In some years, focus groups with DCFS staff, consumer families, youth, foster parents, or other stakeholders are a part of this aspect of the review process. Their observations are briefly described in a separate section.

IV. System Strengths

In the course of the review, many system strengths or assets were observed in individual case practice. Although not every strength was noted in every case, these strengths contributed to improved and more consistent outcomes for children and families. It is worth noting that many of the system strengths noted in Southwest are continuing refinements of strengths that the Region has built and sustained over a number of years. Some of these system strengths or assets are listed below:

- All of the children observed during the review were safe in their current placements.
- ➤ Caseworkers demonstrate excellent performance consistent with the Practice Model and have positive attitudes toward families. Caseworkers are sought out by families and viewed as valuable resources. They can balance the skills of identifying strengths and holding families accountable.
- > Caseworkers routinely engage families, even challenging families, in the change process.
- ➤ Community partners appeared to have "bought into" child and family teams, and the Practice Model.
- The judicial system is generally "on board" and legal stakeholders attend team meetings.
- > Team meetings are purposeful and productive -- they are viewed as the most efficient way to make progress.
- Community partners value the teaming process and take steps to support it. For example, a principal arranges for substitute teachers said that children's teachers are able to attend child and family teams.
- ➤ The Region clearly believes in the Practice Model and it is modeled from the Regional Director down through the entire agency.
- ➤ Caseworkers use creative ways to access funds for services, and even after cases are closed. For example, using community funds to continue needed long-term therapy without requiring the child and family to remain an open case.
- Families are allowed to implement their own creative solutions.
- ➤ There is consistent and thorough exploration of kinship options.
- Families feel ownership of the team process sufficient to allow observers into their team meetings without feeling shamed or on display.
- Caseworkers diligently seek individualized services and good service matching to the needs of families. They are willing to make reasonable demands on providers, and change providers when the provider is not responsive to the needs of a particular family.
- > Some extraordinary efforts to maintain family connections were observed.
- ➤ In those cases where child support obligations are clearly and seriously conflicting with the achievement of important outcomes for children and families, workers are supported in seeking waivers from the Office of Recovery Services (ORS).
- Consistent attention is paid to Indian Child Welfare Act (ICWA) requirements.
- ➤ The community increasingly views DCFS as a positive resource.
- Resource families see themselves as members of the child and family team and take active responsibility for progress and planning. They are not just passive partners.
- Extended family members recognize progress and give DCFS a share out of the credit for the family's success.

- Adoption workers were brought in early to assist the child and family teams in the transitions to adoption.
- Caseworkers take an active advocacy role for families. For example, a caseworker advocated with the court to reduce fines so that the family could make more rapid progress toward reunification.
- ➤ DCFS provides many services directly when they are needed, but currently unavailable to a particular family in their own community. Examples of such directly provided services included domestic violence counseling, individualized parenting instruction, and specific life skills training.
- Reviewers observed good use of flexible funding, without overrunning budget guidelines.

V. Characteristics of the Southwest Region

Trend Indicators for the Southwest Region

The Division provided current Regional trend data and data comparative to the past fiscal year. The table for the Southwest Region, along with that of the other Regions, is included in the Appendix.

VI. Stakeholder Observations

The results of the QCRs should be considered within a broader context of local or Regional interaction with community partners. In some years, the monitor and staff supporting the qualitative reviews interview key community stakeholders. In other years, the interviews included line staff, supervisors, and administrative staff. This year, the Qualitative Case Reviews in the Southwest Region were supported by a total of seven focus groups (three with workers, one with supervisors, one with administrators, one with foster parents, and one with clients). In addition, stakeholder interviews were held with attorneys (both guardian ad litem and attorney general).

Client Focus Group

The client focus group clearly recognized that a family's encounter with the child welfare system can be a complicated journey, and that each family's journey through the system will be different. Even so, the families interviewed seemed to agree that moving from the first fearful, and sometimes angry encounter depended a lot on how the family was treated and the extent to which they felt that they were respected and included in making important assessments and decisions. Some of the themes in the client focus group included:

➤ Having some sense of control and choice really matters. Just being told what to do doesn't promote a sense of partnership or respect. Finding common goals around meeting the needs of both the children and the parents helped the parents understand that, "The caseworker... didn't want to take the kids away, they wanted to keep the family together and that's what happened".

- > Frequently, parents spoke about the importance of choices and options. Having a choice of services or providers helped provide successful matches with the needs and preferences of individual families.
- ➤ Often, it wasn't just finding the right service or provider; it was having supports to obtain or utilize the services. It is one thing to be referred to a service; it is another thing to have help with concerns like transportation and paying for the services.
- Feeling as though resource families were working with the birth family and toward the birth family's goals meant a lot. The foster families supported visitation to help keep parents and children connected. They felt like friends.
- > The caseworkers and teams came to be viewed as genuinely helpful. They paid attention to finding treatment for families close to home, and to including extended family. "Team meetings are not just state people, you have friends and family as well which makes the change a lot easier".
- ➤ DCFS seemed to recognize that, "You can't change someone unless the family wants to change". Caseworkers were able to stand their ground and hold families accountable, but also clearly convey that they would be consistently supportive. As one parent but it, "I would call my worker if I needed help in the future".
- Families were not only able to describe what contributed to their success, but also could state clearly what they had in place to sustain success. For example, parents who had overcome serious substance abuse could list three or four ongoing supports that continue for them after their case had closed.

Foster Parent Focus group

The foster parent focus group, perhaps not surprisingly, shared many views with birth families; prizing respect, inclusion in decision-making, and practical day-to-day supports. The group of foster parents responded to a number of general questions:

What is good about working with DCFS?

Responsive caseworkers were clearly important to foster parents. They said the caseworkers have been good about listening to their needs and being supportive. They also praised pre-adoption workers, especially in light of their travel requirements. One foster mother noted that she had to call the worker once a day on her first child. Honesty and openness were clearly valued. "They don't give the false hopes. They're very forthcoming with information. At the team meetings you feel like part of the team."

What resources are needed?

The foster parents recognized that resources are not evenly distributed across the Region and that in some particularly rural areas even some basic services like medical and dental care are hard to obtain, especially for younger children. Rural areas have fewer specialized services such as mental health providers who understand attachment issues or respite for attending meetings or other obligations. They were hopeful about opening a Family Support Center that can provide a range of services including respite during child and family team meetings and court hearings. "Up front" reimbursement when children arrive with just the clothes on their backs would be a relief -- easier than waiting for later reimbursement. In a related question about vouchers, the foster parents stated that, "They

would be thrilled with vouchers to particular stores. They are still trying to get reimbursed for purchases made just after Christmas [more than a month before the review]. A voucher would be wonderful."

How many families come to the cluster group?

The foster parents thought that the numbers attending didn't reflect the progress they were making. Attendance at regular meetings may be limited to four or five foster parents, but at events for the whole family attendance was much better -- maybe 40 people. The groups were viewed as useful, "It's nice to see who else is doing foster care, and find out where to go for resources, and who has had the same problem that you have had. It really helps to talk to them. There is some training at the meetings, too."

Part of the shift at DCFS is making sure foster parents are included on teams. Do you feel included?

The foster parents were generally positive about their inclusion, but stated that the degree of inclusion varied from office to office -- consistent in some offices and sparse in others. They recognized that there were efforts made to overcome obstacles, including a willingness by the Region to make personnel changes, if necessary. In offices where there is consistent inclusion, foster parents noted, "I have been included on the team with all of my kids. My opinions are valued." One office seemed especially helpful and the foster parents noted workers there always kept them up to date and let them know what's happening ahead of time.

Another part of the shift in practice is to ensure that there is permanency for children. How are they doing with permanency?

The foster parents said that DCFS has been clear with parents about the primary goal being reunification. Their perception was that parents have a fair chance and that DCFS works in a supportive way with parents. As a result, "things have worked out pretty well the way that they should for the kids." This is especially true when there is adequate preparation for returning children to their home [with birth families]. With older children, having an enduring connection with a particular family is very important. Speaking of a 17-year-old foster child, one foster parent noted, "I told her she would always be a member of the family even after she turned 18. This made a huge change in her behavior....She isn't emotionally ready to leave home."

Worker Focus Groups

Three focus groups were held with caseworkers in different parts of the Region. The three groups were asked a variety of questions, most of which are summarized here when there were discernable themes:

What is working, or going well?

There seemed to be a consensus that the Practice Model was central in much of what was happening in the Region. Caseworkers spoke of people applying the Practice Model really well, both within DCFS and, increasingly, across the community. Schools and therapists were described as being really onboard -- as partners with DCFS. Workers felt

that the community generally understood DCFS better because of the growing understanding of the Practice Model within the community. They also spoke of the Practice Model having a positive impact on morale. "Because of Practice Model, families function better so it is better on the workers and they feel like they are succeeding".

Teaming has also become more typical in the community, both around specific cases and in sharing information between agencies. They referred to a weekly Tuesday meeting where community agencies come together to staff cases and share information. They also spoke of the contribution of other agencies to individual child and family team meetings. "When DWS and Vocational Rehabilitation attend, they find there are resources DCFS has forgotten about. They can set up appointments for clients on the spot in team meetings so clients don't procrastinate making the appointment".

Caseworkers were positive about the growth of the peer parent program. They felt that the peer parents were of real quality and that peer parents were an important resource for parents and families. The coordinator has trained a lot of people, making peer parents more available. Practice Model skills have helped staff to transition more cases to inhome services, and the in-home workers are being able to use peer parents. A number of caseworkers spoke about the satisfaction of feeling that they were a part of a team where people work together, support one another, and have good supervision.

The work of the Utah Foster Care Foundation (UFCF) was cited for its supportive role in the development of foster parents through the cluster groups, in-service training, community recognition of foster parents, and encouraging community support for foster families. The groups and social gatherings allow foster parents to get together to support and learn from one another. They also cited the Regional Placement Team (RPT) as a very effective work group, supporting placement families, shifting resources, anticipating problems, and supporting open communication between licensing, DCFS, and UFCF. "[I have] never been at a RPT meeting that hasn't tackled the problem and come up with a solution".

What are the needs, what would you like to change?

Several caseworkers spoke of the need for more, and more flexible resources. Many families don't qualify for Medicaid and others have limited insurance through their employer that doesn't really provide the mental health services that they need. Specialized services like skilled therapy for younger children, and residential treatment for substance abuse are not available in many locations. As a consequence, people don't get exactly what they need or face major travel challenges. They want the Family Support Center to open soon.

New and experienced workers spoke favorably about Practice Model training and said that they wanted more follow-up training, "a refresher", to apply the skills to real cases. "With the lawsuit there was a shift to professionalism that is apparent. The DCFS used to ask the sheriff's office to do reports and investigations for them. Deputies would have to

decide whether to substantiate or not. Now the training is good. New workers ask good questions". Some caseworkers asked for more individualized assessment of training needs to avoid repetition where people have skills already.

Supervisor Focus Group

In the last year, what has been positive?

Consistent reliance on the Practice Model and teaming has produced a number of benefits. Staffing appears to be more stable -- people have confidence and feel like they have the skills to do the job. Teaming is being recognized in the community by other agencies as an effective strategy and DCFS staff members are being recognized as professionals when it comes to teaming. Credibility in the community's is going up all around the Region. Creative funding has been allocated to each unit and they can make their own decisions. Supervisors have been fiscally conservative, working with teams to decide how we can stretch dollars with help from other team members. The prospect of the new Family Support Center will be very helpful.

What seems to be working, to motivate workers, to help them both attend to strengths and help a family face why they are in the system?

Regular focus on the..." Practice Model has given them hope. It gives them less threats, more success, and less stress". Workers recognize that the timeframe to get their families ready to face their issues is short. "The Practice Model skills have given them the tools to meet the challenges". Supervisors are consistent in what they say to workers and how they relate to the workers. They use Practice Model skills in the supervision and when they are involved in team meetings. We're getting to the point that judges, mental health, and schools are all saying that they want to have child and family team meetings. The..." Region sets high expectations". "The supervisor will not sign off on a need statement unless it meets the standard on every plan. A weeding out process has also taken place among workers so those that have remained want to do Practice Model".

What is not working? What would you change?

The progress with the court system and legal partners is not consistent across the Region. Some legal partners struggle with the idea of teaming and that can contribute to a more litigious process that is hard on families and on caseworkers. Workers sometimes feel like they need to be expert witnesses. If workers have good relationships with families, the families come to realize that their frustrations are with the court or the attorneys and not with the worker.

In some locations, drug testing continues to be a problem. There may be no funding for it, but courts order it and we have to pay for it. Having caseworkers do drug testing is out of touch with the Practice Model. It falls more logically to the health department, but DCFS has to do it. We're struggling to get the right contract with providers who do drug tests. There are other resource issues like the Medicaid cap and obtaining specialized mental health services. Getting timely criminal records reports really slows down the recruitment and licensing of foster homes. At times, the Foster Care Foundation says that it takes four to six months to get homes licensed because of this bottleneck.

Administrative Focus Group

Is there a progress report on items brought up in last year's review?

- "Creative intervention monies were given to the supervisors. This has given them ownership and they have been very conservative in using them. They agreed that these funds do help families get the services they need. Not all of the funds were given to the team; some other funds have been held in reserve as a rainy day fund for emergencies".
- ➤ There is recognition that our staff is our primary resource, but that many staff have other jobs. In order to address this situation, the Region is proposing to put in place a workable conflict of interest statement. It's currently under review by the Regional director.
- There has been progress on getting mental health services for families that can't afford it by using creative intervention funds. Two counties still have no specialized services for children under age 5.
- ➤ There is a continued need for more resource families. UFCF is right on target on their recruitment and foster families are being trained. There is still a need to support families in the most rural counties. There is a credit card for supporting financially strapped foster parents, and it can be used for things as basic as gas for visits, doctor's appointments, etc.
- ➤ Drug testing remains a challenge. This is a systemic issue with no line item in the budget to cover the cost to do drug tests that are often court ordered. We have had some success in having the sheriff's office act as the testers. However, in most instances, it is still the worker and that doesn't fit well with their role.
- > SAFE [the state child welfare information system] has had several upgrades and now there are no complaints from any of the workers.
- > Southwest has done a great job in mentoring the skill of a strength based approach coupled with holding people accountable for their actions.
- The Region has spent time working on the most challenging core indicators and practice issues like writing useful needs statements. A good needs statement is a statement that gives the family options. When a need is expressed as a service, it limits the family to just that one thing. Functional assessments are improving, but the form needs to be modified. The Region has used the OSR study of why things are working in certain offices, and uses it as a training tool for other offices.

Some of the current challenges are how to get caseworkers as excited about the case process review as they are about the qualitative case review, and to understand how the case process review relates to outcomes. Another challenge will be understanding what QA looks like in the future. If the Region exits monitoring, we need to know what OSR, the monitor, and the Division have in mind for the Region's monitoring.

Stakeholder Interview with Attorneys

What is working well in the Region?

The attorneys were united in their positive assessment of progress in implementing the Practice Model and, especially, in strengthening the role of families in the child and

family teams. "Since the last QCR [the attorney] has seen extra effort by the Region to see that families are in control of their destiny. [The attorney] has seen efforts to get the family more empowered in the team meeting. The families are the ones that are making the decisions for developing help to get DCFS out of their lives". Service plans were observed to be more successful because teaming is not limited to fixed reviews or planning meetings. "Not only do they have regular meetings, but they have additional meeting to resolve issues as they come up".

The attorneys also noted good relationships with the providers and other community stakeholders. "Working on reaching out to the community...has given a favorable impression in the community. People's view of the Child and Family Team Meeting (CFTM) is one of respect. The CFTM is used to resolve issues before they go to court. This is very helpful to all parties".

Drug court was recognized as a valuable resource for many cases. "[The attorney] believes that 90% of the cases [the attorney] deals with are methamphetamine cases. Because the family doesn't have to pay for the treatments when they are in drug court, they have a good success rate".

What are needs, or areas for improvement?

The attorneys noted that while the drug court was a good resource for many families, there was a lack of affordable options for families not going through drug court. "...Other treatments...are expensive and the families can't afford them, so in [the attorney's] opinion they drop out and have more relapses".

Other resources were identified as either limited in availability or were too expensive for families that fell in the gap between Medicaid eligibility and adequate private insurance. Services for adolescent substance abusers, child sexual offenders, male domestic violence victims, and psychological services for younger children are either unavailable in many of the local areas, or had months-long waiting lists. Having a very limited range of providers for some services also sometimes led families (or their attorneys) to worry that DCFS and the provider were allied in a way that did not work in the families' interest. More services for families affected by methamphetamine, particularly outreach services, would be helpful.

Most of the suggestions for DCFS were refinement issues like strengthening skills in facilitating the larger teams that are now developing, and being sure that communications are up to date with the attorneys when things happen after or between team meetings. One of the attorneys offered to provide some training for caseworkers that felt ill at ease when appearing in court.

VII. Child and Family Status, System Performance, Analysis, Trends, and Practice Improvement Needs

The QCR findings are presented in graphic form to help quantify the observations of the qualitative assessment. Graphs show a comparison of scores for past years' reviews with the current review. The graphs of the two broad domains of <u>Child and Family Status</u> and <u>System Performance</u> show the percent of cases in which the key indicators were judged to be "acceptable." A six-point rating scale is used to determine whether or not an indicator is judged to be acceptable. Reviewers scored each of the cases reviewed using these rating scales. The range of ratings is as follows:

- 1: Completely Unacceptable
- 2: Substantially Unacceptable
- 3: Partially Unacceptable
- 4: Minimally Acceptable
- 5: Substantially Acceptable
- 6: Optimal Status/Performance

Child and Family Status, as well as System Performance, is evaluated using 22 key indicators (11 in each domain). Graphs presenting the overall, summative scores for each domain are presented below. Beneath the graphs for overall information, a graph showing the distribution of scores for each indicator within each of the two domains is presented. Later in this section (section VII, Summary of Case Specific Findings), brief comments regarding progress and examples from specific cases are provided.

Child and Family Status Indicators

Overall Status

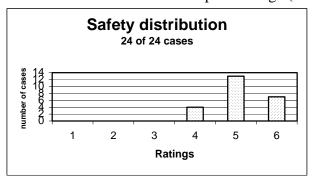
Southwest Child and Family Status

		# of cases		FY00	FY01	FY02	FY03	FY04	FY05
	# of cases	Needing		Baseline					Current
	Acceptable	mprovement	Exit Criteria 85% on overall score	Scores					Scores
Safety	24	0		89.5%	83.3%	87.5%	95.8%	100.0%	100.0%
Stability Appropriateness of	22	2	100.0% 91.7%	01.070	70.8%	75.0%	83.3%	91.7%	91.7%
Placement Prospect for	24	0	100.0%	0.4.20/	95.8%	100.0%	95.8%	100.0%	100.0%
Permanence Health/Physical Well-	21	3	87. \$ %	32.070	79.2%	58.3%	75.0%	91.7%	87.5%
being Emotional/Behavioral	24	0	91.7%	100 00/	100.0%	100.0%	100.0%	100.0%	100.0%
Well-being	22	2	95.8%	68.4%	66.7%	75.0%	91.7%	95.8%	91.7%
Learning Progress Caregiver	23	1	100.0%	04.2 /0	91.7%	91.7%	87.5%	100.0%	95.8%
Functioning Family	12	0		90.0%	100.0%	90.9%	100.0%	100.0%	100.0%
Resourcefulness	16	1	100.0%	62.5%	35.7%	72.2%	73.3%	77.8%	94.1%
Satisfaction	24	0		84.2%	95.8%	95.8%	100.0%	95.8%	100.0%
Overall Score	24	0	22.0	89.5%	83.3%	87.5%	95.8%	95.8%	100.0%

Safety

Summative Questions: Is the child safe from manageable risks of harm (caused by others or by the child) in his/her daily living, learning, working and recreational environments? Are others in the child's daily environments safe from the child? Is the child free from unreasonable intimidation and fears at home and school?

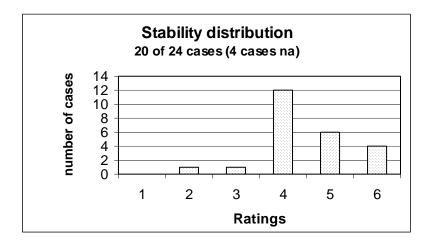
Findings: 100% of cases reviewed were within the acceptable range (4-6).



Stability

Summative Questions: Are the child's daily living and learning arrangements stable and free from risk of disruption? If not, are appropriate services being provided to achieve stability and reduce the probability of disruption?

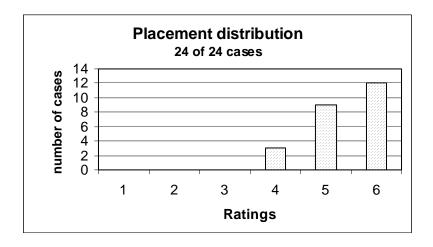
Findings: 91.7% of cases reviewed were in the acceptable range (4-6).



Appropriateness of Placement

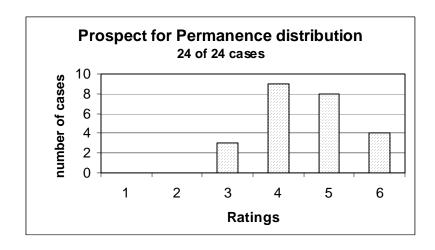
Summative Questions: Is the child in the most appropriate placement consistent with the child's needs, age ability and peer group and consistent with the child's language and culture?

Findings: 100% of cases reviewed were in the acceptable range (4-6).



Prospects for Permanence

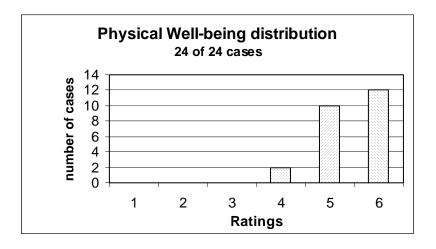
Summative Questions: Is the child living in a home that the child, caregivers, and other stakeholders believe will endure until the child becomes independent? If not, is a permanency plan presently being implemented on a timely basis that will ensure that the child will live in a safe, appropriate, permanent home?



Health/Physical Well-Being

Summative Questions: Is the child in good health? Are the child's basic physical needs being met? Does the child have health care services, as needed?

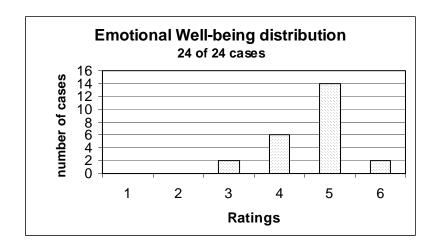
Findings: 100% of cases reviewed were within the acceptable range (4-6).



Emotional/Behavioral Well-Being

Summative Questions: Is the child doing well, emotionally and behaviorally? If not, is the child making reasonable progress toward stable and adequate functioning, emotionally and behaviorally, at home and school?

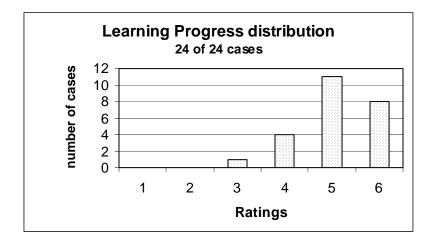
Findings: 91.7% of cases reviewed were within the acceptable range (4-6).



Learning Progress

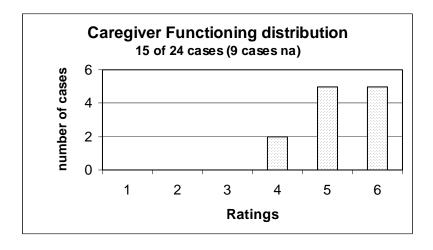
Summative Question: (For children age five and older.) Is the child learning, progressing and gaining essential functional capabilities at a rate commensurate with his/ her age and ability? <u>Note:</u> There is a supplementary scale used with children under five that puts greater emphasis on developmental progress. Scores from the two scales are combined for this report.

Findings: 95.8% of cases reviewed were within the acceptable range (4-6).



Caregiver Functioning

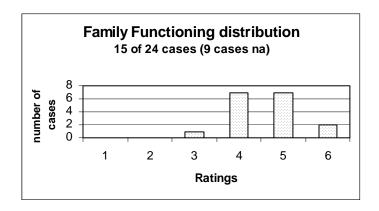
Summative Questions: Are the substitute caregivers, with whom the child is currently residing, willing and able to provide the child with the assistance, supervision, and support necessary for daily living? If added supports are required in the home to meet the needs of the child and assist the caregiver, are these supports meeting the need?



Family Functioning and Resourcefulness

Summative Questions: Does the family, with whom the child is currently residing or has a goal of reunification, have the capacity to take charge of its issues and situation, enabling them to live together safely and function successfully? Do family members take advantage of opportunities to develop and/or expand a reliable network of social and safety supports to help sustain family functioning and well-being? Is the family willing and able to provide the child with assistance, supervision, and support necessary for daily living?

Findings: 94.1% of cases reviewed were within the acceptable range (4-6).



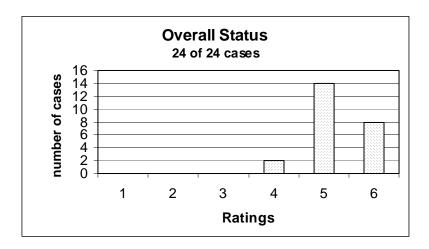
Satisfaction

Summative Question: Are the child and primary caregiver satisfied with the supports and services they are receiving?



Overall Child and Family Status

Summative Questions: Based on the Qualitative Case Review findings determined for the Child and Family Status Exams 1-11, how well are this child and family presently doing? A special scoring procedure is used to determine Overall Child and Family Status using the 6-point rating scale detailed above. A special condition affects the rating of Overall Child and Family status in every case: The Safety indicator always acts as a "trump", so that the Overall Child and Family status rating cannot be acceptable unless the Safety indicator is also acceptable.



System Performance Indicators

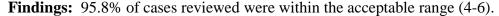
Overall System

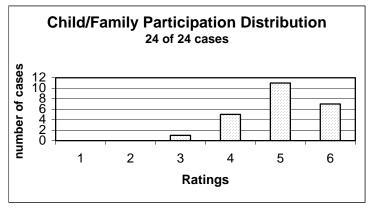
Southwest System Performance

Performance														
		# of cases		is Crisorio	700/	on Cl			FY00	FY01	FY02	FY03	FY04	FY05
	# of cases	Exit Criteria 70% on Shaded cases Needing indicators							Baseline					Current
	Acceptable	Improvement	Ex	it Criteria	85%	on ov	erall so	core	Scores					Scores
Child & Family Team/Coordination	24	0							52.6%	70.8%	66.7%	91.7%	95.8%	100.0%
Functional Assessment	21	3							36.8%	54.2%	41.7%	62.5%	83.3%	87.5%
Long-term View Child & Family Planning	22	2					θ	745% 1.7%	26.3%	37.5%	37.5%	54.2%	87.5%	91.7%
Process	23	1						3.4%	31.6%	58.3%	54.2%	79.2%	83.3%	95.8%
Plan Implementation	24	0							52.6%	75.0%	83.3%	91.7%	95.8%	100.0%
Tracking & Adaptation	24	0							47.4%	75.0%	79.2%	95.8%	95.8%	100.0%
Child & family Participation	23	1					5-7-7-5		52.6%	75.0%	75.0%	83.3%	95.8%	95.8%
Formal/Informal Supports	24	0				• • • • • •			73.7%	87.5%	83.3%	91.7%	91.7%	100.0%
Successful Transitions	22	0						0.80	36.8%	58.3%	69.6%	83.3%	87.5%	100.0%
Effective Results	24	0						₩6.0	47.4%	75.0%	70.8%	83.3%	95.8%	100.0%
Caregiver Support	11	0					-	—	100.0%	100.0%	90.0%	85.7%	100.0%	100.0%
Overall Score	24	0	0	% 20%	40%	60%	80% 1	100%	52.6%	70.8%	79.2%	87.5%	91.7%	100.0%

Child/Family Participation

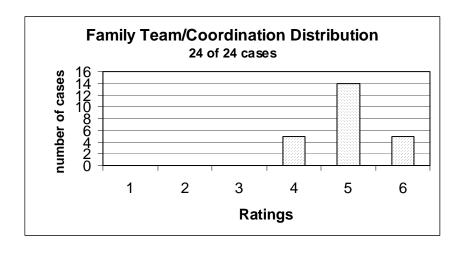
Summative Questions: Are family members (parents, grandparents, and stepparents) or substitute caregivers active participants in the process by which service decisions are made about the child and family? Are parents/caregivers partners in planning, providing, and monitoring supports and services for the child? Is the child actively participating in decisions made about his/her future?





Child/Family Team and Team Coordination

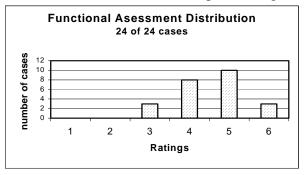
Summative Questions: Do the people who provide services to the child/family function as a team? Do the actions of the team reflect a pattern of effective teamwork and collaboration that benefits the child and family? Is there effective coordination and continuity in the organization and provision of service across all interveners and service settings? Is there a single point of coordination and accountability for the assembly, delivery, and results of services provided for this child and family?



Functional Assessment

Summative Questions: Are the current, obvious and substantial strengths and needs of the child and family identified though existing assessments, both formal and informal, so that all interveners collectively have a "big picture" understanding of the child and family and how to provide effective services for them? Are the critical underlying issues identified that must be resolved for the child to live safely with his/her family independent of agency supervision or to obtain an independent and enduring home?

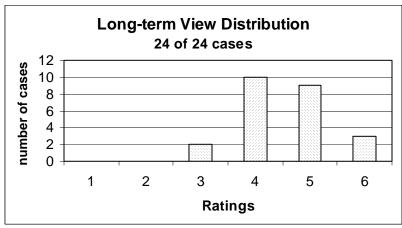
Findings 87.5% of cases reviewed were within the acceptable range (4-6).



Long-Term View

Summative Questions: Is there an explicit plan for this child and family that should enable them to live safely without supervision from child welfare? Does the plan provide direction and support for making smooth transitions across settings, providers and levels or service?

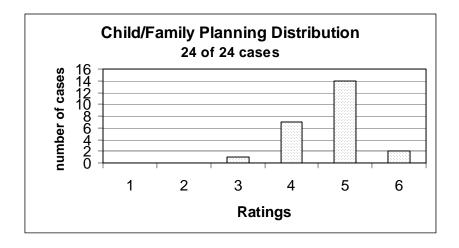
Findings: 91.7% of the cases reviewed were within the acceptable range (4-6).



Child and Family Planning Process

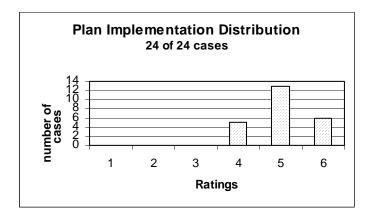
Summative Questions: Is the service plan (SP) individualized and relevant to needs and goals? Are supports, services and interventions assembled into a holistic and coherent service process that provides a mix of elements uniquely matched to the child/family's situation and preferences? Does the combination of supports and services fit the child and family's situation so as to maximize potential results and minimize conflicting strategies and inconveniences?

Findings: 95.8% of cases reviewed were within the acceptable range (4-6).



Plan Implementation

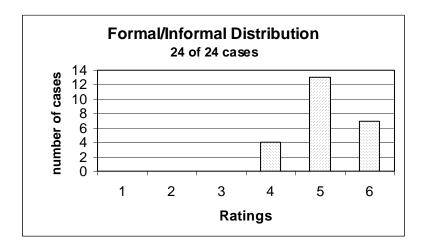
Summative Questions: Are the services and activities specified in the service plan for the child and family, 1) being implemented as planned, 2) delivered in a timely manner and 3) at an appropriate level of intensity? Are the necessary supports, services and resources available to the child and family to meet the needs identified in the SP?



Formal/Informal Supports

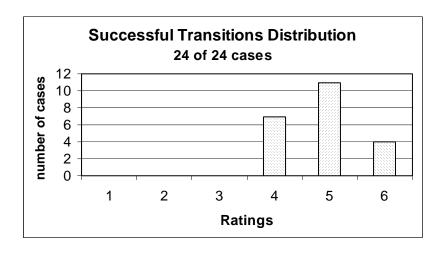
Summative Questions: Is the available array of school, home and community supports and services provided adequate to assist the child and caregiver reach levels of functioning necessary for the child to make developmental and academic progress commensurate with age and ability?

Findings: 100% of cases reviewed were within the acceptable range (4-6).



Successful Transitions

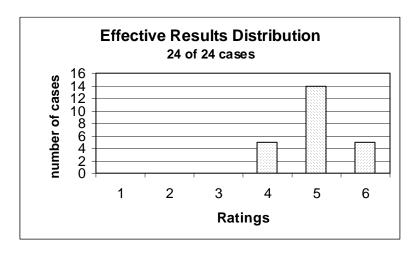
Summative Questions: Is the next age-appropriate placement transition for the child being planned and implemented to assure a timely, smooth and successful situation for the child after the change occurs? If the child is returning home and to school from a temporary placement in a treatment or detention setting, are transition arrangements being made to assure a smooth return and successful functioning in daily settings following the return?



Effective Results

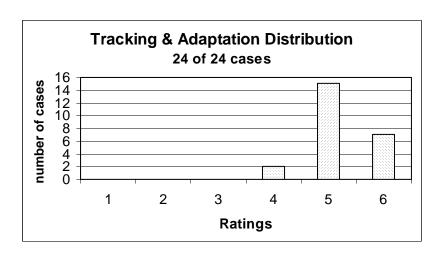
Summative Questions: Are planned education, therapies, services and supports resulting in improved functioning and achievement of desired outcomes for the child and caregiver that will enable the child to live in an enduring home without agency oversight?

Findings: 100% of cases reviewed were within the acceptable range (4-6).



Tracking and Adaptation

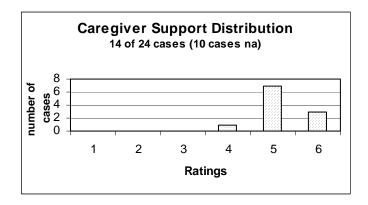
Summative Questions: Are the child and caregiver's status, service process, and results routinely followed along and evaluated? Are services modified to respond to the changing needs of the child and caregiver and to apply knowledge gained about service efforts and results to create a self-correcting service process?



Caregiver Support

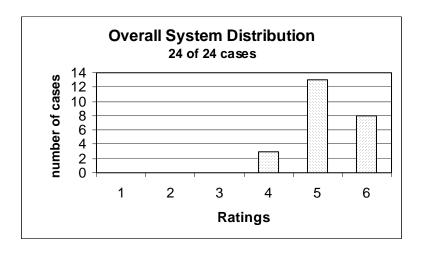
Summative Questions: Are substitute caregivers in the child's home receiving the training, assistance and supports necessary for them to perform essential parenting or caregiving functions for this child? Is the array of services provided adequate in variety, intensity and dependability to provide for caregiver choices and to enable caregivers to meet the needs of the child while maintaining the stability of the home?

Findings: 100% of cases reviewed were in the acceptable range (4-6).



Overall System Performance

Summative Questions: Based on the Qualitative Case Review findings determined for System Performance exams 1-11, how well is the service system functioning for this child now? A special scoring procedure is used to determine Overall System Performance for a child.



Status Forecast

One additional measure of case status is the prognosis by the reviewer of the child and family's likely status in six months, given the current level of system performance. Reviewers respond to this question, "Based on current DCFS involvement for this child, family, and caregiver, is the child's and family's overall status likely to improve, stay about the same, or decline over the next six months? Take into account any important transitions that are likely to occur during this time period." Of the cases reviewed, 25% were anticipated to be unchanged, 0.0% were expected to decline or deteriorate, and 75% were expected to improve.

The status forecasts for the current review appear to represent an interesting transition from the scores from prior years. In the early years of the QCR, the distribution included a number of cases that appeared headed toward a decline in child and family status. There were also cases that were expected to improve, and some that were expected to stay about the same. The "stay about the same" category included about equal numbers of cases that would stay about the same in a positive status and stay about the same in less than positive status. In recent years, the trends in status forecasts has been to more and more cases moving into the improve category, and fewer and fewer into the decline category. Last year, there were no cases in the decline category, few in the stay about the same category, and many in the improve category.

This year, there are fewer scores in the improve category and more scores in the stay about the same category. This might be an alarming finding, but a closer look at the circumstances of the stay about the same category cases appears to provide evidence of further progress and maturing practice in the Region. Many of the cases described as likely to stay about the same are doing very well, are stable and have limited room left for significant improvement. This is a different situation from years past when a number of the cases in the stay about the same category were "stuck" in less than positive status.

Outcome Matrix

The display below presents a matrix analysis of the service testing results during the current QCR. Each of the cells in the matrix shows the percent of children and families experiencing one of four possible outcomes:

- Outcome 1: child and family status acceptable, system performance acceptable
- Outcome 2: child and family status unacceptable, system performance acceptable
- Outcome 3: child and family status acceptable, system performance unacceptable
- Outcome 4: child and family status unacceptable, system performance unacceptable

Obviously, the desirable result is to have as many children and families in Outcome 1 as possible and as few in Outcome 4 as possible. It is fortunate that some children and families do well in spite of unacceptable system performance (Outcome 3). Experience suggests that these are most often, either unusually resilient and resourceful children and families, or children and families who have some "champion" or advocate who protects them from the shortcomings of the system. Unfortunately, there may also be some children and families who, in spite of good system performance, do not do well (these children and families would fall in Outcome 2).

The current outcome matrix represents an exceptional level of positive outcomes. No child welfare system is capable of delivering perfect performance with perfect consistency, so the current results should not be construed as either achieving, or establishing an expectation of perfect performance. That is not a rational or realistic standard of performance. These results are, however, an admirable and remarkable achievement for any child welfare system.

		Favorable Status of Child	Unfavorable Status of Child					
		Outcome 1	Outcome 2					
	Acceptable	Good status for the child,	Poor status for the child,					
	System	agency services presently acceptable. agency services minimally acceptable						
	Performance		but limited in reach or efficacy.					
Acceptability of		n=24	n=0					
Service System		100.0%	0.0%	100.0%				
Performance	Unacceptable	Outcome 3	Outcome 4					
	System	Good status for the child, agency	Poor status for the child,					
	Performance	Mixed or presently unacceptable.	agency presently unacceptable.					
		n=0	n=0					
		0.0%	0.0%	0.0%				
				•				
		100.0%	0.0%					

Summary of Case Specific Findings

Case Story Analysis

For each of the cases reviewed in Southwest Region, the review team produced a narrative shortly after the review was completed. The case story write-up contains a description of the findings, explaining from the reviewer's perspective what seems to be working in the system and what needs improvement. Supplementing the numerical scores, the case stories help to provide insight into how system performance affects important outcomes for particular children and families. The case stories are provided as feedback to the case worker and supervisor responsible for each case reviewed; and all of the case stories are provided to the Office of Services Review and to the Monitor for content analysis and comparison with previous reviews.

The summary of Case specific findings provides selected examples of results and practice issues highlighted in the current review. Some of the results are self-evident or have been stable at an acceptable level and will not be addressed in detail; so only selected indicators are discussed below.

Child and Family Status

Safety

The safety indicator in the current QCR has been maintained at 100 percent. This is the second year in a row at the Region has maintained safety at a very high level. While this is an admirable achievement, is important to note that safety for children receiving services from the Division can never achieve absolute perfection, any more than safety for children in the broader population. The goal of the safety rating is to address known risks through thoughtful, prudent action. One of the strengths noted in several of the cases reviewed in this QCR was the inclusion of specific safety plans to address known risks.

"Careful attention to safety within the family home would seemingly be the foundation for the agency's work with this family. Not only was the safety plan captured on a piece of paper, it was shared and known by all family members. The worker periodically checked with the children, grandmother and parents to ensure the plan was still in place and was continuing to be effective. When asked during this review, all three children and the grandmother quickly rattled off 'line of sight supervision' as the rule in their household."

Another case story demonstrated the quality of practice in the Region that worked to preserve a meaningful role for a father in the daily life of his children, while at the same time paying careful attention to safety issues:

"Both [of the school personnel] indicated that [the father] picks [his daughter] and [his son] up from school and has been their primary contact person. Now that he has a suspended license he has friends and family transport him (part of the safety plan) to and from the school. Both parents have been involved with [their daughter's] academics, homework and achievements at school. It has been reported from multiple Child and Family Team members that the children will wait until their father gets home so they can read to him for a half hour every night."

Appropriateness of Placement

Appropriateness of placement continues to be challenging indicator for rural Regions like the Southwest Region. Distances and limited availability of resource families make finding the right match between a child's needs and available placements very difficult. The Region's 100 percent score on this indicator for a second year in a row reflects careful attention by caseworkers and resource specialists. In one case, careful placement selection allowed three challenging siblings to gradually be reunited, and to live together in a home compatible with their own heritage.

"[The youth] has been in foster care since [date] and has been with [his foster father] and [his foster mother] the entire time. [The youth's] brother [name] was able to move to the same placement in [date]. Finally, in [date] [the youth's] brother, [name], was able to transition into this placement from a residential placement. The team and the foster

parents have gone to great lengths to try to give these boys a sense of family and normalcy..... Another benefit of having [name] and [name] as the foster parents is that they are also Catholic and have been able to maintain [the youth's] religious culture".

Prospects for Permanence

The scores on prospects for permanency remained high this year with the overall average at 87.5 percent (although slightly lower than last year's score of 91.7 percent). Although there has been consistent attention to seeking permanency for children, there were examples of exceptional efforts to provide permanency through adoption, even for adolescents with special needs.

"[The youth] shares a special bond with her foster/adoptive father, as he grew up in foster care and also had the desire to re-establish a relationship with his biological family....

Prospects for permanence appear to be substantial. The foster/adoptive parents, [the youth], and her service team all believe that adoption is in [the youth's] best interest. The foster/adoptive parents maintained that they are committed to making [the youth] a full member of their family, and [they youth] expresses that she is happy with the prospect, which is a radical change in her attitude. All legal barriers to adoption have been eliminated. The foster/adoptive parents will be provided with an adoption subsidy and with a medical card for [the youth] upon finalization of her adoption."

Emotional/Behavioral Well-Being

The Region's scores on emotional and behavioral well-being remained at a high level with a score of 91.7 percent this year (although slightly lower than last year's score of 95.8 percent). Even though there were excellent examples of attention to children's emotional and behavioral well-being, this indicator can be the concern in some cases.

"Emotional well-being is minimally unacceptable. The issue which has been the focus of DCFS involvement is unchanged. The encopresis, by process of elimination of possible causes, is now considered to be emotional or psychological in nature. Because it has been such a long-term problem, there appears to be a lack of urgency in response. This condition affects the behavior, activities, social and peer interactions of the focus child and those of her family. She has experienced ill-treatment by peers alleviated only by the fact that the offenders moved away. She wants to experience more normal adolescent behaviors such as being a cheerleader, but cannot until she manages this problem... The impact on her emotional well-being is considerable".

Family Functioning and Resourcefulness

The Southwest Region has consolidated a number of years of slow improvement on this indicator with an excellent average score this year of 94.1 percent on this very important indicator. This particular indicator is one of the most difficult indicators for human service systems to affect, but it is ultimately one of the most important indicators of child and family status because it addresses the family's ability and readiness to meet the need to the family and the children in the

family after 'the system' is out of their life. The long-term safety and well-being of children depends most heavily on family functioning and resourcefulness. Good short-term results for children in foster care or for families receiving home-based services can evaporate if the families do not have the ability or readiness to meet the needs of family members beyond the closure of the case. The way in which paying attention to family functioning and resourcefulness helps to ensure good long-term results, and fewer children re-entering the child welfare system was evident in one of the cases reviewed.

"[The parent] is functioning well on her own. She has maintained housing and employment for approximately five months. She saved \$900 over the past few months. This was important when she lost her rent subsidy. Having these savings enabled her to secure another apartment on her own. Although she is applying for another subsidy, she is confident she can afford the new apartment with or without the subsidy. Child care is not an expense for [the parent]. Her mother provides all child care while she works. [The parent] appeared confident in her knowledge of community resources. She is applying for Medicaid, food stamps, and WIC, though she is confident she can provide for the children with or without the services. She recently obtained a cell phone and has plans to purchase a car with her income tax refund. For now, she relies on the public transportation system, which she is adept at using."

System Performance

Child and Family Team/Coordination

The indicator that measures child and Family team he and coordination continued its steady improvement over the past four years with a score of 100 percent this year. There is evidence of mature team functioning that is clearly different from staffings in which parents are incidental attendees.

"There is a competent Child and Family Team that includes multiple formal and informal members who have naturally come together to wrap around this family to offer support and assistance on a daily basis. There is a very powerful communication flow between the team members that has helped in the past and present in keeping the tracking and adapting successful. All team members were very clear on the long-term view and were supportive of the decision to close the case within 90 days".

An indication of the strength of teaming and coordination in the Region is that the teams start early in the life of the case and are making plans that extend beyond the end of the case.

"DCFS teaming efforts are evident from the beginning. Community partners for the family increased from 2 to 12 in the first year, and appear to be increasing. The Child and Family Team meets regularly, as well as at critical times. Members are receiving information, giving input and making decisions with some competence. [An older sibling's] therapist and [the child's] school had committed to providing resources outside of usual avenues. Specifically, [the older sibling's] therapist, who works for the proctor

provider, is willing and able to continue as [the older sibling's] therapist after he leaves foster care. [The child's] school provides her with in-school counseling every other week and has provided a substitute teacher for [the child's] class so that the teacher can attend the Child and Family Team meetings".

Functional Assessment

The functional assessment indicator is one of the more challenging indicators of system performance. Achieving an acceptable score on functional assessment requires not only addressing obvious needs, but also understanding underlying needs, and strengths within the child and Family that could help meet those needs. The Region had shown improved performance on the functional assessment score for the past four years, with a current score of 87.5 percent.

"The functional assessment is extensive and holistic in nature. The written document is complete and consists of more than the grouping of statements that have been cut and pasted from the SAFE logs. The worker expresses her views on the situations and provides evidence to support her findings. The assessment has evolved out of the child and Family team with all members being able to provide input. The assessment also appears to be realistic and fluid, changing with circumstances within the family".

As with many aspects of child welfare practice, there are always opportunities for refining practice. Another case story illustrated a functional assessment that would benefit from refinement.

"The functional assessment process succeeded in identifying the obvious issues such as housing, employment, and domestic violence. It covered functional areas such as [the mother's] ability to provide for her children.... It could have been stronger and identifying underlying needs such as [the mother's] need for confidence and self-esteem. It also could have been stronger in identifying underlying causes. Broader exploration of family patterns, family history, and relationships may have contributed important pieces of assessment information".

Long-Term View

Long-term view is another difficult indicator of system performance to achieve consistently. It requires many things; including good engagement and teaming with the child and family, a good functional assessment, and the ability to think beyond case closure. Additionally, a good long-term view must not only describe an appropriate state of independence for the child and family, but must also described the specific steps necessary to sustain progress behind case closure. This year the Region demonstrated continuing improvement with an overall score of 91.7 percent.

"The long-term view is clear and known by all members of the Child and Family Team. It is also changed with changes in the assessments and improvements or regressions in the service plan. The team made a big switch in the long-term view when [the mother]

continued to show less progress than was desired to have the children returned to her care. This switch took into account all possible situations that would contribute to a successful reunification and has included [the father] who will be getting out of prison around [date]".

Another case reviewed illustrated the team's thinking about both short- and longer-term issues that might affect the family.

"From the beginning the team has shared the view that the children would be reunified with the mother. There was an explicit, written long-term view that identified items such as housing and employment that would need to be in place for the children to be able to live with their mother. The long-term view included short-term steps such as sustaining housing and employment and also looked at long-term goals that were not prerequisites to the children returning home such as [the mother] passing her GED, taking some college classes, and participating in vocational rehabilitation".

Tracking and Adaptation

The indicator for tracking and adaptation examines the extent to which the team monitors progress and expected results, and makes appropriate and timely changes to the Child and Family Plan. This year, the Region demonstrated continued improvement with an average score on this indicator of 100 percent.

"When the services were not immediately available, [the father] and the team took the initiative to find another way to get them. For instance, when the traditional anger management classes at [a provider] were not available, [the father] went out and got his own anger management therapist. When a traditional parenting class was not readily available, the therapist personally tutored [the father] through some of the material being covered. ([The father] also drove from [his hometown] to [a city about 50 miles away] to receive this help)".

Another case illustrated the way that tracking and adaptation reveals that a prescribed service is not actually needed, reducing the burden on parents to perform unnecessary tasks.

"[The mother] briefly participated in family therapy but was released after just a few weeks when the therapist determined that her relationship with the children and her parenting skills were both strong enough that he didn't see a need to continue family therapy".

Successful Transitions

The indicator for successful transitions is often related to other indicators such as the functional assessment, long-term view, and the child and family planning process. It measures the extent to which the team recognizes important transitions and acts to ensure their success. This year the Southwest Region scored 100 percent on this indicator. One

case that was reviewed built on a trusting relationship with a former foster home to help an adolescent weather at challenging transition to an adoptive placement.

"The former foster parents continue to be a support to [the adolescent] by making her welcome in their home and by providing a forum in which she can discuss her questions and concerns about her new placement and upcoming adoption. The former foster parents have also been cooperative and have worked well with the foster/adoptive family to assist in [the adolescent's] transition into her new home and family".

Another case illustrated the benefit of careful transition planning to support potentially risky, but worthwhile reunifications.

"[The mother] completed her drug treatment with [a residential provider] in [date]. Three months later [the mother] had progressed enough that a trial home placement with a detailed transition plan was put into place. [The mother] reports that she has a good friend and sponsor from her 12-step program that she contacts on a regular basis. [The mother] and the children have done very well since the children's return home and she has been able to maintain a safe, stable, and appropriate placement for them during the past year and a half".

Summary

Last year, the Southwest Region became the first Region in Utah to meet the Milestone Plan exit criteria related to the QCR for a single year. Because of the Region's unwavering focus and consistent effort, this year the Southwest Region is the first Region in Utah to meet the Milestone Plan exit criteria related to the QCR for two consecutive years. This is a remarkable achievement and means that the Region will now exit regular annual Qualitative Case Reviews by the Monitor. In subsequent years, the Region will continue the QCR process as an ongoing practice improvement initiative, working with the DCFS and OSR. The Milestone Plan anticipates that the Monitor will continue to observe the Region's progress on other measures, and pay attention to any indication of significant regression.

The Southwest Region's achievement is important well beyond the borders of the Region. It indicates that the progress envisioned by the Milestone Plan is a practical possibility. It also makes it worthwhile to pay close attention to the leadership and strategies that have made this significant achievement possible. From the outset, the Region has taken the Practice Model seriously and has made it central to planning, training, administration and supervision. The Region has also looked for ways to apply the Practice Model and the principles underlying it at many different levels, from front-line training and supervision to promoting the Practice Model as a way for the community to come together and reach agreement about how to work successfully to meet the needs of children and families. The Practice Model and the concept of teaming appeared to be having a growing influence across agencies and in the broader community.

The Region was early in its attention to data, and in its development of helpful tools to assist staff in mastering the most challenging aspects of practice. For example, when the Region recognize that capturing a practical long-term view was particularly difficult for staff, the Region developed a work tool to help staff know if they had an adequate long-term view for a particular case. Similarly, when the Region confronted the particular challenges of the limited number and range of services in a rural area, the Resource Development Team emerged to assist child and family teams in using creative intervention funds to craft more individualized services and supports for families. At the same time, the Regional administration was working with existing providers to encourage greater flexibility and more accountability to get better outcomes from the Region's limited financial resources.

In addition to skilled leadership and administration, Southwest Region appears to have been unusually successful in integrating strategic planning, training, supervision, and mentoring to translate ideas and vision into practical action. Both in the stakeholder interviews and focus groups, and in the case stories there were frequent and consistent themes of "spreading the word" about the Practice Model throughout the community and at all levels within the agency. This produced an appreciation in the community for the changes the agency was trying to make, and an increasing adoption by community partners of some of the principles and tools of the Division (such as the use of child and family teams to make important decisions).

No system is perfect and even in the best systems there are opportunities for continued refinement and growth. The Southwest Region is well-positioned to continue its own development of practice and to model important next steps. There are at least two important tasks ahead:

- There is an opportunity to focus sustained attention on the most challenging aspects of system performance, (1) in order to maintain the quality of practice with new staff and, (2) to extend best practice to increasingly difficult applications. There remain families and circumstances that challenge even the most capable systems. The Southwest Region is in a position to lead in this important work.
- As the Region exits court related QCR's, the Region's Quality Improvement Committee inherits the daunting task of supporting continued improvement in outcomes and practice, and in helping the community to understand the role of the community in protecting children and strengthening families. The Office of Services Review will continue to support the QCR process, but the deeper involvement of the community is primarily a Regional responsibility.

VIII. Recommendations for Practice Refinement

At the conclusion of the week of Qualitative Case Reviews, there is an opportunity for a conversation between the review team, Regional staff, and community stakeholders about the strengths observed during the review process (see Section IV) and the opportunities for continued practice refinement. Because of the advanced state of practice in the Region, there

was a conscious effort to focus on a small number of issues with the greatest promise of contributing to continued improvement in practice and outcomes.

Practice Refinement Opportunities

Functional Assessment

- Give increased attention to underlying issues in the functional assessment, especially to understanding underlying issues that affect parental functioning.
- There is good attention to the information gathering, and more focus on synthesis and analysis of information would strengthen the assessment process.
- It may be helpful to use Child and Family Team meeting notes to help update the functional assessment.
- Some functional assessments would be strengthened by looking at the whole family as system and not just focusing on the child.
- Caseworkers could benefit from a stronger understanding of needs statements -- that needs are not services.
- Regular feedback from supervisors on the quality of functional assessment and service plans could promote continued refinement.

Other Issues

- Occasionally, there seemed to be challenges in the coordination of services and the communication of information between therapists from different agencies.
- At times, team meetings are not held at opportune moments -- off the regular schedule, but in response to current events in the case.
- Team meetings could be strengthened by individual contacts with team members to prepare them for meetings or to resolve particular concerns.
- Some school transitions would benefit from closer follow-up.

System Barriers

- Some courts prohibit visits between parents and children while parents are incarcerated, even when such visits would not present a safety risk and would be beneficial to the children.
- It is difficult and time consuming to get an ORS waiver in situations that would directly benefit children in care. A streamlined process is needed.
- Young children and others who are not Medicaid eligible cannot access mental health services in some areas.
- Substance abuse treatment for adolescents is not available in some areas.
- The workload on drug court cases is high.
- Families need help to afford required drug testing.
- Some members of the medical community continue to miss opportunities to report abuse.
- Caseworkers' direct involvement in performing drug tests on clients seriously conflicts with their role with families.
- There is a continuing struggle to obtain timely background checks for resource families.

• Treatment for sexually offending youth and other specialized treatment services are not available in some areas; and require either very extensive travel or placing children at substantial distances from their home community.

Recommendations

Recommendations were developed in a conversation between the reviewers, Regional staff and community stakeholders during the exit conference. The list is short, but attention to these items could help ensure continued progress in the Region.

- Continue to strengthen the local Quality Improvement Committee and their ability to report regularly to the community on outcomes and system performance.
- Polish and refine the functional assessment tool and process. Involve supervisors and caseworkers in the process of refining the tool.
- Consider advanced Practice Model skills training for staff that addresses application of the Practice Model by experienced caseworkers in challenging circumstances.

Appendix

Milestone Trend Indicators

1. Number and percent of Home-Based child clients who came into Out-of-Home care within 12 months of Home-Based case closure. (Data is pulled one year prior in order to look 12 months forward)

	1st QT 2003		2nd QT 2003		3rd QT 2003		4th QT 2003		1st QT 2004		2nd QT 2004		3RD QT 2004		4th QT 2004	
	Number P	ercent	<u>Number</u>	Percent	Number	Percent	Number I	ercent	Number I	ercent	Number	Percent	Number I	Percent	Number P	ercent
Northern	19	5%	10	3%	7	2%	14	4%	21	6%	21	6%	14	3%	14	4%
Salt Lake	24	4%	15	4%	29	6%	14	2%	33	6%	32	6%	26	5%	29	5%
Western	3	2%	12	8%	13	8%	2	1%	3	2%	3	2%	11	6%	1	1%
Eastern	5	5%	8	9%	6	6%	7	6%	4	4%	3	3%	7	5%	8	5%
Southwest	5	7%	5	7%	2	2%	9	10%	3	4%	2	1%	1	1%	0	0%
State	56	5%	50	5%	57	5%	46	4%	64	5%	59	5%	59	4%	52	4%

2. Number and percent of children in Out-of-Home care who were victims of substantiated allegations of abuse and neglect by out-of-home parents, out-of-home care siblings, or residential staff. Please note that reported abuse may have occurred years prior to the disclosure

	1st QT 2004		2nd QT 2004		3rd QT 2004		4th QT 2004		1st QT 2005		2nd QT 2005		3rd QT 2005		4th QT 2005	
	Number Pe	ercent	<u>Number</u>	Percent	<u>Number I</u>	Percent	<u>Number</u>	Percent	Number	Percent	<u>Number</u>	Percent	Number	Percent	Number P	Percent
Northern	1 0	.32%	3	0.56%	5	0.91%	1	0.12%	3	0.62%	5	0.84%	2	0.31%	5	0.77%
Salt Lake	7 0	.61%	1	0.08%	5	0.44%	3	0.19%	5	0.44%	2	0.17%	2	0.16%	0	0.00%
Western	0 0	.00%	0	0.00%	3	0.95%	1	0.16%	1	0.30%	3	0.89%	3	0.81%	1	0.61%
Eastern	1 0	.32%	0	0.00%	0	0.00%	1	0.58%	1	0.33%	2	0.72%	0	0.00%	0	0.00%
Southwest	1 0	.68%	0	0.00%	1	0.59%	1	0.38%	1	0.44%	0	0.00%	0	0.00%	1	0.26%
State	10 0	.40%	4	0.16%	14	0.56%	7	0.20%	11	0.43%	12	0.48%	7	0.26%	7	0.26%

3. Number and percent of substantiated child victims with a prior Home-Based or Out-of-Home care case within the last 12 months.

	1st QT 2004		2nd QT 2004		3rd QT 2004		4th QT 2004		1st QT 2005		2nd QT 2005		3rd QT 2005		4th QT 2005		
	Number	Percent	<u>Number</u>	Percent	Number	Percent	<u>Number</u>	Percent	Number	Percent	Number I	Percent	Number I	Percent	Number F	Percent	
Northern	41	5%	33	5%	44	5%	52	6%	51	7%	65	8%	27	4%	47	6%	
Salt Lake	76	5%	76	5%	80	3%	89	6%	74	4%	72	5%	62	4%	75	6%	

Western	7	1%	33	6%	13	3%	15	2%	14	3%	14	3%	27	5%	29	5%
Eastern	17	9%	18	7%	15	9%	17	10%	14	6%	10	7%	13	9%	7	4%
Southwest	8	3%	4	2%	7	3%	15	6%	10	3%	14	6%	13	4%	20	6%
State	149	4%	162	5%	152	5%	188	5%	163	5%	175	5%	141	5%	178	5%

4. Number and percent of substantiated child victims with a prior CPS substantiated allegation within the last 12 months.

	1st QT 2004		2nd QT 2004		3rd QT 2004		4th QT 2004		1st QT 2005		2nd QT 2005		3rd QT 2005		4th QT 2005	
	Number F	Percent	<u>Number</u>	Percent	Number P	ercent	<u>Number</u> <u>P</u>	ercent	Number P	ercent	Number P	ercent	<u>Number</u> <u>F</u>	Percent	<u>Number</u> I	Percent
Northern	96	11%	112	15%	99	13%	98	12%	119	16%	109	13%	74	10%	95	12%
Salt Lake	151	10%	177	12%	196	12%	234	16%	199	12%	214	14%	200	14%	224	16%
Western	64	12%	80	14%	74	14%	82	13%	59	11%	82	15%	73	14%	87	15%
Eastern	36	20%	32	13%	28	17%	27	16%	49	22%	20	13%	18	12%	23	12%
Southwest	20	7%	33	13%	39	16%	24	9%	46	16%	24	10%	43	13%	64	19%
State	371	10%	435	13%	436	13%	465	13%	472	14%	449	14%	408	13%	493	15%

5. Number and percent of children in care for at least one year that attained permanency through case closure prior to 24 months of custody. (Data is pulled two years prior in order to look 24 months forward)

	1st QT 2002		2nd QT 2002		3rd QT 2002		4th QT 2002		1st QT 2003		2nd QT 2003		3rd QT 2003		4th QT 2003	
	Number F	Percent	<u>Number</u>	Percent	Number <u>I</u>	Percent	Number I	Percent	Number F	ercent	<u>Number</u>	Percent	Number I	Percent	Number I	Percent
Northern	17	57%	13	54%	15	56%	18	69%	24	56%	7	39%	19	58%	27	71%
Salt Lake	39	56%	41	55%	46	60%	43	56%	39	56%	23	50%	29	44%	54	59%
Western	14	61%	12	57%	18	78%	16	57%	9	38%	13	54%	23	92%	12	46%
Eastern	5	42%	3	20%	10	50%	10	56%	12	80%	4	19%	6	29%	3	18%
Southwest	12	63%	8	67%	4	80%	4	100%	2	50%	4	80%	6	67%	7	70%
State	87	56%	77	53%	93	61%	91	59%	86	55%	51	45%	83	54%	103	57%

6. Number and percent of children who entered Out-of-Home care who attained permanency through custody termination within one year. (Data is pulled one year prior in order to look 12 months forward)

	1st QT 2003		2nd QT 2003		3rd QT 2003		4th QT 2003		1st QT 2004		2nd QT 2004		3rd QT 2004		4th QT 2004	
	Number	Percent	<u>Number</u>	Percent	Number	Percent	Number	Percent	Number I	Percent	Number	Percent	Number I	Percent	Number F	ercent
Northern	100	71%	90	83%	107	76%	91	71%	96	70%	77	76%	88	62%	111	69%
Salt Lake	84	55%	70	60%	105	61%	150	62%	95	51%	105	62%	132	61%	130	62%

Western	44	65%	39	62%	49	65%	17	40%	35	80%	26	53%	30	44%	29	58%
Eastern	30	67%	36	63%	37	64%	35	67%	46	69%	51	69%	22	69%	21	62%
Southwest	9	69%	17	77%	23	72%	14	58%	22	65%	28	74%	34	81%	27	73%
State	267	63%	252	69%	321	67%	307	63%	294	63%	287	67%	306	62%	318	65%

7. Number and Percent of children with prior custody episodes within 6, 12, and 18 months.

		1st QT 2004		2nd QT 2004		3rd QT 2004		4th QT 2004		1st QT 2005		2nd QT 2005		3rd QT 2005		4th QT 2005	
		<u>Number</u>	Percent	Number F	Percent	Number	Percent	Number F	Percent	Number I	Percent	Number	Percent	<u>Number</u>	Percent	Number F	ercent
Northern	6 mos	8	6%	7	7%	13	9%	20	13%	12	9%	16	14%	8	7%	18	12%
	12 mos	18	13%	11	11%	15	11%	30	19%	15	12%	17	15%	15	13%	20	14%
	18 mos	22	16%	15	15%	15	11%	30	19%	17	13%	17	15%	18	15%	22	15%
Salt Lake	6 mos	12	7%	6	4%	13	7%	16	8%	7	4%	13	6%	11	5%	20	10%
	12 mos	16	9%	12	7%	20	10%	17	9%	8	5%	22	11%	17	8%	26	13%
	18 mos	19	11%	19	11%	20	10%	17	9%	3	6%	24	12%	20	9%	30	16%
Western	6 mos	0	0%	0	0%	0	0%	4	8%	3	5%	4	7%	4	5%	1	2%
	12 mos	1	3%	1	2%	3	5%	5	10%	4	7%	6	10%	6	8%	3	6%
	18 mos	1	3%	3	6%	5	8%	5	10%	7	13%	6	10%	7	9%	4	8%
Eastern	6 mos	6	9%	8	11%	2	6%	1	3%	5	12%	2	8%	4	8%	2	4%
	12 mos	8	12%	9	12%	5	15%	3	9%	9	22%	6	25%	5	10%	4	8%
	18 mos	10	15%	13	6%	5	15%	3	9%	9	22%	6	25%	5	10%	5	10%
Southwest	6 mos	1	3%	0	0%	2	5%	2	5%	1	4%	0	0%	0	0%	2	7%
	12 mos	1	3%	0	0%	2	5%	2	5%	2	1%	1	4%	1	2%	3	11%
	18 mos	1	3%	0	0%	2	5%	2	5%	2	1%	1	4%	1	2%	3	11%
State	6 mos	27	6%	21	5%	30	6%	43	9%	28	7%	35	8%	27	5%	43	9%
	12 mos	44	10%	33	8%	45	9%	57	12%	38	9%	52	12%	44	8%	56	12%
	18 mos	53	12%	50	12%	47	10%	57	12%	43	11%	54	13%	51	10%	64	14%

8. Average months in care of cohorts of children in out-of-home care by goal, ethnicity and sex. Workers have 45 days to establish a goal and enter it in SAFE. Cases that were closed prior to a goal being established are not reported under this trend.

		1st QT 2004		2nd QT 2004		3rd QT 2004		4th QT 2004		1st QT 2005		2nd QT 2005		3rd QT 2005		4th QT 200	5
Adoption		Number	Avg Mo	Number	Avg Mo	Number A	vg Mo	Number	Avg Mo	Number A	vg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo
	Northern	17	21	20	20	16	19	13	21	15	13	11	17	15	16	23	14

													[
Salt Lake Valley	42	26	55	20	25	21	31	24	23	21	41	24	44	16	48	23
Western	12	17	11	19	8	12	9	10	4	10	6	21	3	41	5	15
Eastern	3	15	6	25	7	18	6	10	4	20	7	12	n/a	n/a	9	16
Southwest	2	16	3	19	8	15	11	9	2	4	4	13	16	19	2	10
State	76	23	95	20	64	18	70	18	48	17	69	21	78	18	87	19
Guardianship														<u> </u>	l .	
Northern	2	7	3	8	1	4	1	6	n/a	n/a	1	6	n/a	n/a		
															*See	
Salt Lake Valley	10	26	12	19	4	25	12	13	6	24	10	38	n/a	n/a	below	,
Western	4	16	4	17	1	1	6	19	3	11	2	21	n/a	n/a		
Eastern	4	25	1	12	2	28	1	13	3	34	2	8	n/a	n/a		
Southwest	2	15	2	15	2	8	n/a	n/a	3	3	n/a	n/a	n/a	n/a		
State	22	21	22	16	10	18	20	15	15	19	15	29	n/a	n/a		
Guardianship with Relative													1	ı	Ī	
Northern													n/a	n/a	1	17
Salt Lake Valley													7	8	10	11
Western													2	7	2	11
Eastern			*The Goal	"Guardians	chin" ha	e hoor	obsol	otod a	nd ronl	acad w	/ith		2	8	2	11
Southwest			two more d										n/a	n/a	n/a	n/a
State			"Guardians										11	7	15	11
Guardianship Non-Relative			and identify				. 0. 40.	10 00		o plant	ĺ					
Northern													n/a	n/a	2	19
Salt Lake Valley													n/a	n/a	2	41
Western													n/a	n/a	n/a	n/a
Eastern													n/a	n/a	1	2
Southwest													n/a	n/a	n/a	n/a
State													n/a	n/a	5	24
Independent Living			1	<u>-</u>	ı		İ		ī		İ		i	;		
Northern	9	34	8	34	6	42	7	18	7	42	2	34	2	83		
Salt Lake Valley	32	32	15	31	11	34	20	31	9	40	4	30	2	45	No	
Western	7	37	6	16	2	25	5	24	8	26	1	18	n/a	n/a	long	er
Eastern	9	41	3	59	6	23 47	12	35	6	16	3	57	n/a	n/a		
	9 7		2	39 37	2	47 72	3	35 25	_	_	_	-				
Southwest	1	40	4	31	4	12	J	25	1	15	n/a	n/a	n/a	n/a	l	

State	64	35	34	32	27	41	47	29	31	31	10	38	4	64		
Individualized Permanency Plan																
	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo
Northern	11	20	3	5	2	12	10	32	4	41	8	51	12	33	17	43
Salt Lake Valley	6	75	6	37	5	31	7	23	29	43	25	42	29	26	31	50
Western	1	28	5	35	1	80	1	7	5	42	9	40	6	31	9	27
Eastern	2	22	6	61	5	50	8	46	1	6	3	16	5	30	9	42
Southwest	5	16	2	12	0	0	2	40	5	23	6	30	7	26	6	36
State	25	33	22	36	13	39	28	33	44	40	51	40	59	28	72	44
Reunification (Previously Return Home)																
	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo
Northern	49	10	51	7	35	8	45	6	50	9	29	8	56	10	40	7
Salt Lake Valley	75	10	78	10	77	7	81	8	102	10	87	9	80	8	89	8
Western	9	8	20	7	28	10	29	8	25	8	14	7	20	10	22	7
Eastern	22	6	21	5	18	6	13	6	33	7	24	9	6	13	27	7
Southwest	10	9	11	7	8	15	12	8	30	8	7	4	14	9	11	7
State	165	9	181	8	166	8	181	7	240	9	161	8	176	9	189	7

Average length of stay of children in custody by ethnicity. Data is average number of months.

	101 (QT-04	2nd 0	OT 04	3rd C	NT 04	14h C	QT-04	1st C	T 05	2nd (QT-05	2 rd (QT-05	4th Q1	- 05
	151	₹1 - 04	Zilu C	<u> </u>	3iu u	(1-04	401 6	(1-04	151 6	(1-05	Ziiu C	Z 1-03	Siu	X1-03	4tii Q i	-03
	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo	Number	Avg Mo
African American																
Northern	13	11	13	5	3	7	3	12	8	10	5	5	4	26	13	7
Salt Lake Valley	9	13	3	10	8	5	14	5	9	21	8	22	11	12	18	14
Western	3	15	2	13	1	7	1	22	3	11	0	n/a	2	23	5	10
Eastern	0	n/a	0	n/a	1	100	1	6	3	7	0	n/a	0	n/a	2	1
Southwest	2	46	0	n/a	0	n/a	1	35	0	n/a	1	2	2	46	0	n/a
State	27	15	18	7	13	13	20	8	23	14	14	20	19	19	38	11
American Indian/Alaska Native													•			
Northern	7	10	7	5	2	10	5	3	5	9	1	8	12	13	11	4
Salt Lake Valley	13	8	8	23	7	5	7	7	12	16	8	7	11	20	2	12
Western	7	10	3	25	3	13	2	8	5	12	0	n/a	1	8	2	12
Eastern	11	13	8	48	6	40	7	44	6	8	6	33	1	0	9	22
Southwest	0	n/a	4	6	2	12	4	18	1	0	2	11	7	20	3	2

State	38	10	30	23	20	18	25	18	29	12	17	17	32	16	27	11
Asian															i	
Northern	3	2	3	2	0	n/a	0	n/a	0	n/a	1	1	1	1	2	4
Salt Lake Valley	4	51	1	44	2	21	7	11	3	9	1	6	0	n/a	5	15
Western	1	36	0	n/a	0	n/a	0	n/a	1	47	0	n/a	0	n/a	0	n/a
Eastern	0	n/a	0	n/a	1	6	0	n/a	0	n/a	0	n/a	0	n/a	0	n/a
Southwest	0	n/a	0	n/a	1	4	0	n/a	0	n/a	1	2	0	n/a	0	n/a
State	8	31	4	13	4	13	7	11	4	19	3	3	1	1	7	12
Caucasian															i	
Northern	118	10	99	9	90	9	123	8	108	9	78	11	112	11	99	14
Salt Lake Valley	159	20	173	15	140	11	155	14	164	17	170	18	181	12	182	17
Western	29	17	41	14	40	11	53	9	39	15	35	18	34	15	33	14
Eastern	44	13	35	12	35	14	35	18	42	11	40	9	20	14	44	12
Southwest	30	15	18	13	26	13	26	8	46	9	17	14	35	13	16	18
State	380	15	366	13	331	11	392	11	399	13	340	15	382	12	372	15
Hispanic																
Northern	44	3	32	5	27	5	44	3	32	5	27	5	37	8	41	13
Salt Lake Valley	48	12	63	10	53	13	48	12	63	10	53	13	62	10	65	10
Western	12	9	7	10	2	1	12	9	7	10	2	1	5	8	6	16
Eastern	4	20	6	9	8	6	4	20	6	9	8	6	8	21	13	10
Southwest	7	8	17	8	1	9	7	8	17	8	1	9	1	15	0	n/a
State	115	8	125	8	91	10	115	8	125	8	91	10	113	10	125	12
Cannot Determine																
Northern	0	n/a	4	19	0	n/a	0	n/a	0	n/a	0	n/a	0	n/a	0	n/a
Salt Lake Valley	3	19	1	10	0	n/a	0	n/a	1	1	0	n/a	0	n/a	0	n/a
Western	0	n/a	0	n/a	0	n/a	0	n/a	0	n/a	0	n/a	0	n/a	0	n/a
Eastern	0	n/a	0	n/a	0	n/a	0	n/a	0	n/a	0	n/a	0	n/a	0	n/a
Southwest	1	1	0	n/a 17	0	n/a	2	3	0	n/a	0	n/a	0	n/a	0	n/a
State	4	19	5	17	0	n/a	2	3	1	n/a	0	n/a	0	n/a	0	n/a
Pacific Islander	0	2/2	2	.4		2/2	0	2/0		2/0	4	20	_	10	2	0
Northern Salt Lake Valley	0 3	n/a 10	2 4	<1 11	0	n/a 13	0 2	n/a 16	0 2	n/a 22	1 5	38 5	2 0	13 n/a	2 7	9 5
Sait Lake Valley Western	3 0	n/a	1	2	4	13	2	22	1	22 16	0	อ n/a	0	n/a n/a	1	8
western Eastern	0	n/a n/a	0	∠ n/a	0	n/a	0	n/a	0	n/a	0	n/a n/a	0	n/a	1	3
Southwest	0	n/a	0	n/a	0	n/a	1	9	0	n/a	0	n/a	1	14	4	4
State	3	10	7	7	5	14	5	12	3	20	6	11	3	13	15	5

Average number of months children in custody by sex

	1st QT	2004	2nd QT	2004	3rd QT 2	2004	4th QT 2	2004	1st QT 2	005	2nd QT	2005	3rd QT 2	2005	4th QT 200	05
	Male F	emale	<u>Male</u>	<u>Female</u>	Male F	emale	Male F	emale	Male Fe	emale	Male F	emale	Male F	emale	<u>Male</u> F	emale
Northern	10	11	10	8	10	8	7	8	11	8	10	12	12	11	11	13
Salt Lake Valley	22	15	16	14	12	9	15	13	17	18	21	15	12	12	15	17
Western	16	17	17	12	12	10	9	10	10	21	20	16	20	10	11	14
Eastern	13	13	20	17	11	24	26	16	13	8	15	9	11	14	17	12
Southwest	22	10	15	7	7	17	13	8	9	9	11	15	12	17	9	18
State	17	13	15	11	11	12	13	11	13	13	17	14	13	12	14	15

9. Percent of CPS investigations initiated within the time period mandated by state or local statute, regulation, or policy.

		1st QT	2004	2nd QT 20	004	3rd QT	2004	4th QT	2004	1st QT	2005	2nd QT	2005	3rd QT 2	005	4th QT	2005
		Total Per Number Tim			Percent on Time	Total P Numbero		Total Poly			ercent n Time	Total P Numbero		Total Perce Number Time		F Total o Number T	
Northern	priority 1	7	100%	3	100%	2	100%	1	0%	n/a*	n/a*	2	100%	n/a*	n/a*	n/a*	n/a*
	priority 2	230	91%	249	94%	296	93%	302	91%	254	93%	307	94%	269	94%	345	97%
	priority 3	911	72%	779	77%	774	78%	912	74%	817	75%	875	81%	855	82%	938	81%
	priority 4	167	80%	168	83%	188	88%	224	81%	172	84%	171	87%	143	87%	53	89%
Salt Lake	priority 1	34	76%	22	82%	23	87%	19	89%	20	85%	20	95%	29	93%	17	100%
	priority 2	362	90%	375	92%	375	91%	422	92%	333	91%	380	89%	330	95%	422	91%
	priority 3	1587	68%	1600	70%	1611	74%	1820	73%	1780	70%	1794	72%	1628	74%	1951	76%
	priority 4	422	76%	406	75%	378	76%	363	83%	390	81%	331	84%	335	83%	115	81%
Western	priority 1	20	90%	15	93%	20	80%	24	92%	21	95%	14	93%	16	94%	16	94%
	priority 2	70	84%	82	82%	96	91%	108	85%	57	86%	104	94%	103	92%	110	90%
	priority 3	402	65%	489	70%	490	57%	546	78%	468	75%	501	74%	496	83%	640	83%
	priority 4	146	61%	119	70%	5	60%	135	75%	146	80%	127	74%	132	81%	53	72%
Eastern	priority 1	14	57%	19	79%	10	90%	9	78%	5	100%	12	83%	4	75%	14	86%
	priority 2	39	95%	43	86%	40	73%	46	83%	34	88%	32	94%	26	85%	37	92%
	priority 3	233	85%	275	79%	248	81%	234	85%	250	80%	223	85%	236	83%	267	82%
	priority 4	17	82%	18	61%	12	92%	8	63%	12	75%	7	86%	8	88%	2	100%
Southwest	priority 1	14	79%	16	75%	16	88%	23	91%	13	77%	13	92%	16	81%	18	89%

	priority 2	50	90%	31	84%	49	90%	47	91%	47	94%	53	91%	43	98%	35	91%
	priority 3	270	86%	300	84%	290	87%	308	85%	345	80%	295	84%	317	90%	399	85%
	priority 4	122	93%	91	90%	73	90%	80	94%	85	80%	84	86%	39	79%	17	94%
State	priority 1	89	79%	75	83%	68	88%	76	88%	59	88%	61	92%	65	89%	65	92%
	priority 2	756	90%	785	91%	865	91%	929	90%	726	91%	879	92%	772	94%	952	93%
	priority 3	3410	72%	3447	73%	3385	77%	3826	76%	3669	74%	3691	76%	3532	79%	4203	80%
<u>. </u>	priority 4	876	72%	803	77%	758	81%	812	82%	806	81%	722	83%	657	83%	242	82%

^{*}n/a indicate no priority 1 referrals.

10. Percent of children experiencing fewer than three placement changes within an Out-of-Home Care service episode.

	1st QT 2	2004	2nd QT 2	004	3rd QT	2004	4th QT	2004	1st QT	2005	2nd QT	2005	3rd QT	2005	4th QT 20	05
	Number P	ercent	Number	Percent	Number <u>F</u>	Percent	Number F	Percent	Number F	ercent	Number I	Percent	Number F	Percent	Number F	Percent
Northern	97	72%	81	64%	70	74%	92	71%	82	70%	60	71%	77	64%	82	69%
Salt Lake	101	53%	79	42%	95	62%	101	57%	82	43%	86	46%	103	53%	120	57%
Western	26	68%	31	66%	33	72%	39	70%	27	59%	20	57%	23	62%	19	49%
Eastern	40	80%	25	57%	28	65%	24	56%	31	63%	26	58%	12	57%	40	77%
Southwest	17	51%	10	45%	19	68%	23	68%	36	77%	14	70%	29	67%	18	78%
State	281	62%	226	53%	245	67%	279	63%	258	57%	206	56%	244	67%	279	63%

11. Number and percent of children in placement by order of restrictiveness. Point-in-time: last day of the report period.

	1st Q	T 2004	2nd QT 20	04	3rd QT	2004	4th QT	2004	1st QT	2005	2nd QT	2005	3rd Q	T 2005	4th QT	2005
Residential Treatment	Number	Percent	Number F	ercent	Number F	Percent	Number F	ercent	Number F	Percent	Number P	Percent	Number	Percent	Number F	ercent
Northern	n 44	10%	44	11%	47	10%	73	12%	86	14%	86	14%	78	15%	68	13%
Salt Lake Valle	120	13%	128	14%	131	14%	252	22%	237	21%	231	20%	130	13%	120	13%
Western	25	10%	24	10%	33	12%	50	15%	57	18%	47	14%	38	11%	35	10%
Eastern	14	5%	25	9%	27	10%	42	13%	39	13%	36	13%	25	10%	23	9%
Southwes	t 7	6%	8	6%	9	6%	16	10%	16	10%	14	10%	11	25%	10	7%

State	210	100/	229	11%	247	12%	433	17%	435	17%	414	17%	282	13%	256	110/
	210	10%	229	11%	247	12%	433	17%	433	17%	414	17%	202	13%	236	11%
Group Home												ĺ				ĺ
Northern	11	3%	5	1%	7	2%	23	4%	18	3%	15	3%	9	2%	13	2%
Salt Lake Valley	61	6%	66	7%	72	7%	134	12%	121	11%	97	8%	49	5%	56	6%
Western	2	1%	4	2%	3	1%	4	1%	8	2%	6	2%	5	2%	6	2%
Eastern	6	2%	8	3%	10	4%	11	4%	5	2%	4	1%	7	3%	10	4%
Southwest	4	4%	5	4%	2	1%	9	5%	7	4%	7	5%	2	2%	1	1%
State	84	4%	88	4%	94	4%	181	7%	159	6%	129	5%	72	3%	86	4%
Therapeutic/Treatment Foster Homes																
Northern	132	30%	146	36%	166	37%	198	33%	200	33%	197	33%	143	28%	151	28%
Salt Lake Valley	224	24%	224	24%	226	23%	297	26%	270	24%	265	23%	254	26%	248	26%
Western	94	38%	95	38%	104	39%	131	40%	129	40%	123	37%	109	33%	106	31%
Eastern	99	38%	103	36%	101	36%	128	41%	118	39%	104	38%	92	35%	88	34%
Southwest	35	31%	31	25%	41	29%	50	30%	50	31%	42	31%	33	25%	35	25%
State	584	29%	599	30%	638	30%	804	31%	768	30%	731	29%	631	28%	628	28%
		T						1								
	1st Q	T 2004	2nd QT 20	04	3rd QT	2004	4th QT	2004	1st QT	2005	2nd QT	2005	3rd Q	T 2005	4th QT	2005
Family Foster Home	<u>Number</u>	Percent	Number F	ercent	<u>Number</u> <u>F</u>	ercent	<u>Number</u> <u>F</u>	ercent	<u>Number</u> <u>P</u>	ercent	<u>Number</u> <u>F</u>	Percent	<u>Number</u>	Percent	<u>Number</u> <u>F</u>	ercent
Northern	203	47%	182	45%	206	46%	352	59%	349	58%	332	56%	236	46%	260	48%
Salt Lake Valley	456	48%	421	45%	451	47%	621	54%	602	53%	611	53%	463	47%	438	46%
Western		45%	116	46%	119	44%	167	52%	161	50%	178	53%	165	50%	154	45%
Eastern	130	50%	143	50%	139	20%	172	55%	162	54%	142	51%		50%	129	50%
Southwest	54	48%	77	62%	79	56%	103	62%	94	59%	82	61%	_	57%	85	60%
State	956	48%	939	47%	994	47%	1415	55%	1368	54%	1345	54%	1070	48%	1066	48%
Other		400/	00	5 0/		001	00	00/	00	400/	70	400/	50	400/	40	201
Northern	44	10%	20	5%	14	3%	38	6%	60	10%	72	12%		10%	49	9%
Salt Lake Valley	93	10%	79	8% 5%	78 40	8%	159	14%	167	15%	192	17%	89	9%	94	10%
Western	15	6% 3%	12 7	5% 2%	10	4% 0%	31	10% 4%	42	13% 6%	41	12% 5%	14	4% 2%	38	11%
Eastern	9 13	3% 12%	4	2% 3%	0 8	0% 6%	12 16	4% 10%	18 30	6% 19%	13 23	5% 17%	5 11	2% 8%	6 11	2% 8%
Southwest			•											8% 8%		
State	174	9%	122	6%	110	5%	256	10%	317	13%	341	14%	169	გ%	198	9%

12. Number and percent of all children younger than five years at entry who exit custody in year and who did not attain permanency within six months by closure reason.

1003011.																
	1st QT	2004	2nd QT	2004	3rd QT	2004	4th QT	2004	1st QT	2005	2nd QT	2005	3rd QT	2005	4th QT 20	005
Adoption final																
	Number F	ercent	<u>Number</u>	Percent	Number F	Percent	Number <u>F</u>	Percent	Number F	Percent	Number F	Percent	Number I	Percent	Number F	ercent
Northern	14	64%	12	60%	11	58%	10	71%	15	71%	7	47%	13	62%	13	62%
Salt Lake	22	69%	40	78%	18	51%	22	79%	10	33%	27	69%	32	84%	28	64%
Western	11	73%	3	75%	9	69%	8	80%	4	50%	3	33%	0	0%	4	40%
Eastern	0	0%	2	25%	2	67%	2	29%	3	33%	2	20%	0	0%	6	55%
Southwest	0	0%	2	67%	7	100%	6	67%	0	0%	4	80%	9	64%	1	100%
State	47	62%	59	69%	47	61%	48	70%	32	43%	43	55%	54	65%	52	60%
Reunification	1	ı	1													
	Number F	ercent	<u>Number</u>	Percent	Number F	Percent	Number [Percent	Number [Percent	Number F	ercent	Number I	Percent	Number F	ercent
Northern	5	23%	2	10%	5	26%	3	21%	5	24%	6	40%	6	29%	7	33%
Salt Lake	10	31%	4	8%	15	43%	5	18%	15	50%	8	21%	5	13%	9	20%
Western	2	13%	0	0%	4	31%	1	10%	3	38%	5	56%	4	50%	6	60%
Eastern	3	60%	3	38%	0	0%	5	71%	5	56%	8	80%	1	50%	4	36%
Southwest	2	100%	1	33%	0	0%	2	22%	5	83%	1	20%	5	36%	0	0%
State	22	29%	10	12%	24	31%	16	24%	33	45%	28	36%	21	25%	26	30%
Custody Returned to Relative/Guardian	1	ı	1											1		1
	Number F	ercent	<u>Number</u>	Percent	Number [Percent	Number [Percent	Number F	Percent	Number F	Percent	Number I	Percent	Number F	ercent
Northern	3	14%	6	30%	3	16%	1	7%	1	5%	2	13%	2	10%	1	5%
Salt Lake	0	0%	5	10%	2	6%	1	4%	4	13%	3	8%	0	0%	4	9%
Western	0	0%	1	25%	0	0%	0	0%	1	13%	1	11%	4	50%	0	0%
Eastern	2	40%	1	13%	1	33%	0	0%	0	0%	0	0%	1	50%	0	0%
Southwest	0	0%	0	0%	0	0%	1	11%	1	17%	0	0%	0	0%	0	0%
State	5	3%	13	15%	6	8%	3	4%	7	9%	6	8%	7	8%	5	6%
Custody to Foster Parent	1		1			ī			•		1					
	Number F	ercent	<u>Number</u>	Percent	Number F	Percent	Number <u>f</u>	Percent	Number F	Percent	Number F	ercent	Number I	Percent	Number F	ercent
Northern	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Salt Lake	0	0%	2	4%	0	0%	0	0%	0	0%	0	0%	1	3%	2	5%
Western	0	0%	0	0%	0	0%	1	10%	0	0%	0	0%	0	0%	0	0%
Eastern	0	0%	1	13%	0	0%	0	0%	1	11%	0	0%	0	0%	1	9%

Southwest	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
State	0	0%	3	3%	0	0%	1	1%	1	1%	0	0%	1	1%	3	3%
Death																
	Number P	ercent	Number	Percent	Number F	ercent	Number F	ercent	Number P	ercent	Number P	ercent	Number P	ercent	Number P	ercent
Northern	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Salt Lake	0	0%	0	0%	0	0%	0	0%	1	3%	0	0%	0	0%	0	0%
Western	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Eastern	0	0%	1	13%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Southwest	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
State	0	0%	1	1%	0	0%	0	0%	1	1%	0	0%	0	0%	0	0%
Age of Majority	-															
	Number P	ercent	<u>Number</u>	Percent	Number F	ercent	Number <u>F</u>	ercent	Number P	ercent	Number P	ercent	Number P	ercent	Number P	ercent
Northern	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Salt Lake	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	1	2%
Western	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Eastern	0	0%	1	13%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Southwest	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
State	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	1	1%

13. Number and percent of all children exiting custody in year who did not attain permanency within six months by closure reason.

Adoption final	1st QT	2004	2nd QT 2	2004	3rd QT	2004	4th QT	2004	1st QT	2005	2nd Q1	2005	3rd QT	2005	4th QT 20	05
	Number I	Percent	<u>Number</u>	Percent	Number I	Percent	Number	Percent	Number F	Percent	Number	Percent	Number F	Percent	Number F	Percent
Norther	n 18	27%	22	42%	18	41%	13	29%	17	31%	12	31%	18	27%	23	36%
Salt Lake Valle	y 37	32%	55	43%	23	27%	33	32%	22	20%	43	37%	45	42%	41	34%
Wester	n 13	43%	10	30%	10	33%	10	29%	6	17%	6	21%	2	8%	5	18%
Easter	n 0	0%	4	19%	7	29%	4	13%	4	11%	2	7%	0	0%	7	23%
Southwes	t 2	9%	4	27%	7	54%	7	35%	1	4%	4	36%	17	47%	2	18%
Stat	e 70	27%	95	38%	65	33%	67	29%	50	19%	67	30%	82	33%	78	31%

Emancipation										i				,		
	Number P	ercent	<u>Number</u>	Percent	Number F	ercent	Number F	ercent	Number F	ercent	Number F	ercent	Number F	ercent	Number I	Percent
Northern	8	12%	1	2%	7	16%	9	20%	7	13%	6	15%	10	15%	8	13%
Salt Lake Valley	24	21%	9	7%	10	12%	15	15%	30	27%	20	17%	23	22%	26	22%
Western	6	20%	5	15%	3	10%	5	14%	10	28%	7	25%	2	8%	9	32%
Eastern	6	21%	3	14%	3	13%	11	35%	7	19%	4	14%	3	23%	6	20%
Southwest	9	41%	3	20%	2	15%	4	20%	1	4%	2	18%	5	14%	2	27%
State	53	20%	21	8%	25	13%	44	19%	55	21%	39	17%	43	17%	51	21%
Returned to parents	•															
	Number P	ercent	<u>Number</u>	Percent	Number F	ercent	Number F	Percent	Number F	ercent	Number <u>F</u>	Percent	Number F	Percent	Number I	Percent
Northern	28	42%	16	31%	14	32%	14	31%	20	37%	12	31%	28	42%	19	30%
Salt Lake Valley	31	27%	33	26%	41	49%	35	34%	44	39%	28	24%	18	17%	30	25%
Western	5	17%	11	33%	16	53%	11	31%	10	28%	12	43%	12	50%	12	43%
Eastern	9	32%	5	24%	5	21%	10	32%	20	56%	20	71%	3	23%	12	40%
Southwest	8	36%	6	40%	1	8%	8	40%	19	83%	3	27%	11	31%	4	36%
State	81	31%	71	28%	77	39%	78	33%	113	43%	75	34%	72	29%	77	31%
Custody to relative/guardian	_															
	Number P	ercent	<u>Number</u>	<u>Percent</u>	Number F	ercent	Number F	ercent	Number F	ercent	Number F	ercent	Number F	ercent	Number I	Percent
Northern	11	17%	9	17%	4	9%	3	7%	6	11%	7	18%	8	12%	2	3%
Salt Lake Valley	8	7%	19	15%	4	5%	7	7%	8	7%	7	6%	7	7%	10	8%
Western	2	7%	5	15%	0	0%	4	11%	6	17%	2	7%	6	25%	1	4%
Eastern	6	21%	2	10%	3	13%	4	13%	1	3%	0	0%	3	23%	0	0%
Southwest	1	5%	1	7%	2	15%	1	5%	2	9%	1	9%	3	8%	0	0%
State	28	11%	36	14%	13	7%	19	8%	23	9%	17	8%	27	11%	13	5%
Custody to youth corrections																
	Number P	ercent	<u>Number</u>	<u>Percent</u>	Number F	ercent	Number F	ercent	Number F	ercent	Number F	ercent	Number F	Percent	Number I	Percent
Northern	0	0%	0	0%	0	0%	5	11%	3	6%	1	3%	0	0%	8	13%
Salt Lake Valley	10	9%	5	4%	4	5%	5	5%	6	5%	7	6%	6	6%	5	4%
Western	1	3%	0	0%	0	0%	2	6%	1	3%	1	4%	0	0%	0	0%
Eastern	3	11%	1	4%	3	13%	2	7%	0	0%	1	4%	3	23%	1	3%
Southwest	2	9%	0	0%	1	8%	0	0%	1	4%	0	0%	0	0%	0	0%
State	16	6%	6	3%	8	4%	14	6%	11	4%	10	4%	9	4%	14	6%

Custody to foster parent																
	Number [Percent	Number	Percent	Number F	Percent	Number	Percent	Number [Percent	Number <u>F</u>	ercent	Number <u>F</u>	ercent	Number F	Percent
Norther	n 1	2%	1	2%	0	0%	0	0%	0	0%	0	0%	2	3%	0	0%
Salt Lake Valle	y 1	1%	3	2%	1	1%	3	3%	1	1%	3	3%	2	2%	3	3%
Wester	n 1	3%	2	6%	0	0%	2	6%	0	0%	0	0%	0	0%	0	0%
Easter	n 2	7%	3	14%	0	0%	0	0%	3	8%	1	4%	0	0%	3	10%
Southwe	st 0	0%	1	7%	0	0%	0	0%	0	0%	1	9%	0	0%	0	0%
Stat	e 5	2%	10	4%	1	1%	5	2%	4	2%	5	2%	4	2%	6	2%
Death										i				i		ī
	Number [Percent	Number	Percent	<u>Number F</u>	Percent	Number	Percent	Number [Percent	Number <u>F</u>	ercent	<u>Number F</u>	ercent	Number F	ercent
Norther	n 0	0%	1	2%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Salt Lake Valle	y 0	0%	0	0%	0	0%	0	0%	1	1%	0	0%	0	0%	0	0%
Wester	n 0	0%	0	0%	0	0%	1	3%	0	0%	0	0%	0	0%	0	0%
Easter	n 0	0%	1	5%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Southwe	st 0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Stat	e 0	0%	2	1%	0	0%	1	<1%	1	<1%	0	0%	0	0%	0	0%
Non-petitional release	1									i		ı		1		i
	Number F		Number		<u>Number F</u>				Number <u>I</u>		Number <u>F</u>		<u>Number F</u>		Number F	
Norther	n 0	0%	0	0%	1	2%	0	0%	0	0%	0	0%	0	0%	0	0%
Salt Lake Valle	-	3%	0	0%	0	0%	0	0%		0%	0	0%	0	0%	0	0%
Wester	n 2	7%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Easter	_	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Southwe		0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Stat	e 5	2%	0	0%	1	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Child Ran Away	Í									ĺ		ı		ı		ĺ
	Number F		Number						Number [<u>Number</u> <u>F</u>				Number F	
Norther	-	0%	0	0%	0	0%	1	2%		2%	1	3%	1	1%	4	6%
Salt Lake Valle	1	2%	5	4%	1	1%	5	5%		0%	8	7%	6	6%	4	3%
Wester		0%	0	0%	1	3%	0	0%		6%	0	0%	1	4%	1	4%
Easter		7%	0	0%	2	8%	0	0%		3%	0	0%	1	8%	1	3%
Southwe		0%	0	0%	0	0%	0	0%		0%	0	0%	0	0%	1	9%
Stat	e 4	2%	0	0%	4	2%	6	3%	4	2%	9	4%	9	4%	11	4%

Voluntary custody terminated												_				
	Number P	ercent	Number	<u>Percent</u>	Number	Percent	Number I	Percent	Number [Percent	Number <u>F</u>	ercent	Number F	Percent	Number I	Percent
Northern	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Salt Lake Valley	0	0%	0	0%	0	0%	0	0%	0	0%	1	1%	0	0%	0	0%
Western	0	0%	0	0%	0	0%	0	0%	1	3%	0	0%	1	4%	0	0%
Eastern	0	0%	0	0%	1	4%	0	0%	0	0%	0	0%	0	0%	0	0%
Southwest	t 0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	1	9%
State	0	0%	0	0%	1	1%	0	0%	1	>1%	1	<1%	1	<1%	1	<1%

14. Number and percent of children age 18 or older, exiting care by education level.

	1st QT	2004	2nd QT	2004	3rd QT	2004	4th QT	2004	1st Qt	2005	2nd Qt	2005	3rd Qt	2005	4th Qt 20)5
	Number F	Percent	<u>Number</u>	Percent	Number F	ercent	Number F	Percent	Number F	Percent	Number P	ercent	Number F	ercent	Number F	ercent
Attending School	_	_														
Norther		30%	0	0%	ì	38%	2	20%	1	13%	0	0%	2	17%	3	23%
Salt Lak	e 6	27%	8	62%	3	27%	1	6%	2	6%	0	0%	3	13%	3	13%
Wester	n 3	50%	2	33%	2	50%	0	0%	1	10%	0	0%	1	33%	0	0%
Easter	n 3	43%	0	0%	1	17%	5	42%	0	0%	3	43%	1	33%	2	33%
Southwes	st 9	82%	1	50%	1	50%	1	25%	1	33%	0	33%	1	20%	3	75%
Stat	e 24	43%	11	42%	10	32%	9	19%	5	9%	3	9%	8	17%	11	19%
Graduated																
Norther	n 0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Salt Lak	e 0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Wester	n 0	0%	0	0%	0	0%	0	0%	1	10%	1	14%	0	0%	0	0%
Easter	n 0	0%	0	0%	1	17%	0	0%	3	50%	0	0%	0	0%	0	0%
Southwes	st 0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Stat	e 0	0%	0	0%	1	3%	0	0%	4	7%	1	2%	0	0%	0	0%
Not in School*																
Norther	n 0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Salt Lak	e 0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Wester	n 0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Easter	n 0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Southwes		0%	0	0%		0%	0	0%		0%	0	0%		0%	0	0%

St	ate	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Data Not Entered in System																	
North	ern	8	80%	2	100%	5	63%	8	80%	7	88%	6	100%	10	83%	10	77%
Salt La	ake	17	77%	6	46%	8	73%	16	94%	29	94%	20	100%	21	88%	21	88%
West	ern	3	50%	4	67%	2	50%	5	100%	8	80%	6	86%	2	67%	10	100%
East	ern	4	57%	3	100%	4	67%	7	58%	3	50%	4	57%	2	67%	4	67%
Southw	est	3	27%	1	50%	1	50%	3	75%	2	67%	2	67%	4	80%	1	25%
St	ate	35	63%	16	62%	20	65%	9	81%	49	84%	38	88%	39	83%	46	81%

^{*}Not in school means dropped out, suspended or expelled.

15. Number of children in custody who are legally freed for adoption and the percent who are placed in an adoptive home within six months.

	1st QT	2004	2nd QT 20	004	3rd QT	2004	4th QT	2004	1st Qt 2	2005	2nd Qt	2005	3rd Qt 2	2005	3rd Qt 200)5
	Number F	Percent	<u>Number</u>	Percent	Number F	ercent	Number F	ercent	Number P	ercent	Number F	Percent	Number P	ercent	Number F	ercent
Northern	26	42%	18	22%	16	19%	2	14%	14	14%	14	7%	18	11%	17	29%
Salt Lake	47	21%	40	20%	33	12%	4	15%	23	30%	15	13%	24	25%	29	21%
Western	1	0%	1	0%	1	0%	0	0%	1	0%	1	0%	1	0%	7	57%
Eastern	12	42%	8	13%	3	0%	1	17%	4	25%	3	0%	3	0%	5	0%
Southwest	8	13%	5	20%	3	33%	1	50%	2	50%	3	33%	1	0%	1	0%
State	94	29%	72	19%	56	14%	8	16%	44	25%	39	11%	47	17%	59	25%

16. Number and Percent of adoption placements that disrupt before finalization.

	1st QT 2	2004	2nd QT 2	004	3rd QT 2	2004	4th QT	2004	1st Qt 2	2005	2nd Qt 2	2005	3rd Qt 2	2005	4th Qt 200	05
	Number P	ercent	<u>Number</u>	Percent	Number Percent		Number Percent		Number Percent		Number Percent		Number Percent		Number F	Percent
Northern	1	3%	0	0%	0	0%	0	0%	1	4%	0	0%	0	0%	5	11%
Salt Lake	0	0%	1	1%	1	2%	0	0%	0	0%	0	0%	0	0%	0	0%
Western	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Eastern	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Southwest	1	11%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
State	2	2%	1	1%	1	1%	0	0%	1	1%	0	0%	0	0%	5	4%